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than her ability to identify the presence or absence of a target symbol in an array (Symbol Search), placing her in the Average and Low Average ranges, respectively. She worked accurately (she did not make any errors on these two tasks).

Assessment of Academic Functioning

To assess [REDACTED]'s academic skills, she was administered the Wechsler Individual Achievement Test – Third Edition (WIAT-III) and the Nelson-Denny Reading Test. All WIAT-III scores are derived by comparing [REDACTED] to same-aged peers; Nelson-Denny Reading Test scores are derived by comparing [REDACTED] against other second semester sophomores.

[REDACTED]'s oral language skills were evaluated using the Oral Language Composites of the WIAT-III. She earned a composite score of 104, which fell in the Average range of functioning and placed her in the 61st percentile. Her listening comprehension placed her in the High Average range of functioning and above a twelfth grade level. Within Listening Comprehension, she performed in the High Average range on a test of receptive vocabulary and in the Average range on a test of oral discourse comprehension. [REDACTED] performed in the Average range and a seventh grade level on a subtest that measured her speaking vocabulary, word retrieval, flexibility of thought processes, oral syntactic knowledge and short-term memory (Oral Expression). Within this subtest, her expressive vocabulary and sentence repetition were measured in the Average range, while her oral word fluency placed her in the Low Average range.

[REDACTED] achieved a Reading Composite of 103 on the WIAT-III, placing her in the 58th percentile and in the Average range of functioning. Her phonological awareness (or knowledge of letter sounds) placed her in the Average range of functioning and above high school level. Her single word reading abilities placed her in the High Average range of functioning and above high school level. Her oral reading fluency placed her in the Average range of functioning and at a twelfth grade level; specifically, both her oral reading accuracy and her oral reading rate were measured in the Average range (she answered 1 of 2 comprehension questions correctly). Her reading comprehension placed her in the Average range of functioning and at a fifth grade level. This untimed reading task was comprised of open-ended questions (as opposed to multiple choice) with access to the passage when answering questions.

The Nelson-Denny Reading Test was administered to further evaluate her reading speed and comprehension. The Nelson-Denny includes two multiple-choice subtests, Vocabulary and Comprehension. Standard scores were calculated based on [REDACTED]'s performance within the standard-time and extended-time limit conditions. Within the 15-minute standard time limit on the Vocabulary subtest, [REDACTED] performed in the High Average range of functioning and at a college sophomore level (86th percentile); similarly, in the extended-time condition ([REDACTED] used 18 of 24 minutes allotted), [REDACTED]'s performance placed her in the High Average range of functioning and at a college sophomore level (85th percentile). Within the 20-minute standard time limit on the Comprehension subtest, [REDACTED] performed in the High Average range of functioning at a college sophomore level (78th percentile); on the extended time condition of the Comprehension subtest (Jenna used 23 of 32 minutes allotted), [REDACTED]'s performance placed her in the Average range of functioning and twelfth grade level. A total reading score is derived by summing the Vocabulary score with the Comprehension score. Her total reading score placed her in the High Average range for both the standard and extended time conditions (83rd and 77th percentiles, respectively). Part way through the first passage in the Comprehension subtest, reading rate is also assessed; [REDACTED]'s reading rate (reading silently to herself) placed her in the High Average range of functioning (84th percentile).

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[REDACTED]'s written language abilities were assessed by the Written Language Composite of the WIAT-III, which measures her spelling and her ability to write complex sentences and an organized essay. [REDACTED] obtained a composite score of 108, which fell in the Average range and placed her in the 70th percentile. Her spelling ability placed her in the Average range of functioning and at a twelfth grade level (errors included "achievement," "obsurd," "flurtacious"). Her ability to write grammatically correct, meaningful sentences placed her within the High Average range of functioning and above high school level. Anecdotally, [REDACTED] took time to think before and while writing and the task was not completed quickly; she also made some spelling errors, including of a target word which was written in the prompt (e.g., "prefor" for "prefer"; "vegatables"; "could'nt"; "untill"). Her ability to write a well-organized and persuasive essay within a time restriction placed her in the Average range of functioning and at a ninth grade level. Her essay length and her theme development and text organization fell in the Average range. She used all of the time allotted; she did not use the blank space provided to plan what she would write. The essay task is scored based on content and organization and not on semantics, grammar, or mechanics, but she did make multiple spelling errors (e.g., "amoung"; "injoys").

[REDACTED]'s mathematic skills were evaluated using the Mathematics Composite of the WIAT-III, which consists of two untimed tasks that assess mathematical abilities. She earned a composite score of 113, which fell in the High Average range of functioning and placed her in the 81st percentile. [REDACTED]'s math reasoning (Math Problem Solving) placed her in the High Average range of functioning and above high school level; anecdotally, individual items and the entire section took [REDACTED] a long time to complete but she persisted and performed well. Her computational skills (Numerical Operations) placed her in the Average range of functioning and above high school level. [REDACTED] earned a math fluency composite, which consists of three timed math tasks that assess math fluency, of 89, which fell in the Low Average range of functioning and at the 23rd percentile; she made a couple of calculation errors. Specifically, [REDACTED] performed in the Average range on fluency tests of addition (eighth grade equivalence) and multiplication (seventh grade equivalence), and in the Low Average range on a fluency test of subtraction (sixth grade equivalence). There was a statistically significant difference between her (untimed) Mathematics Composite and her (timed) Math Fluency Composite. Furthermore, her Math Fluency Composite was significantly lower (≥ 2 standard deviations) than predicted by her GAL.

Executive Functioning, Memory, and Learning

In order to assess [REDACTED]'s memory, learning, attention, concentration, and other areas of executive functioning, Wechsler Intelligence Scale for Children - Fifth Edition (WISC-V) selective subtests, the Wide Range Assessment of Memory and Learning - Second Edition (WRAML2), the Delis-Kaplan Executive Function System (D-KEFS), the Conners CPT, and the Conners CATA were administered. In addition, [REDACTED] and Mrs. [REDACTED] each completed the Behavior Rating Inventory of Executive Function Second Edition (BRIEF-2) and the Behavior Assessment System for Children, Third Edition (BASC-3). Teacher forms were not completed because [REDACTED] was out of school for most of tenth grade.

[REDACTED] completed the WISC-V optional subtests (which do not contribute to the FSIQ) of symbol translation. These tasks measure verbal-visual associative memory or paired associates learning, storage and retrieval fluency and accuracy, and immediate recall; these abilities are closely associated with reading decoding skills, reading comprehension, and math calculation and reasoning. [REDACTED]'s ability to learn visual-verbal pairs and then translate symbol strings into phrases or sentences was measured in the

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Average range (Immediate Symbol Translation). Similarly, her ability to translate the symbol strings into phrases or sentences after a delay was in the Average range (Delayed Symbol Translation).

[REDACTED]'s ability to encode and recall orally and visually presented material was evaluated with the Wide Range Assessment of Memory and Learning – Second Edition (WRAML2). Her overall immediate memory and delayed recognition memory were measured in the Very Low and Low Average ranges, respectively (Screening Memory = 76, 5th percentile; General Recognition Memory = 87, 19th percentile).

Her immediate recall and delayed recognition verbal memory both fell in the Low Average range (Verbal Memory Immediate Recall = 85, 16th percentile; Verbal Memory Recognition = 88, 21st percentile). Her performance on a task which required her to recall contextual information presented in a story form (Story Memory) placed her in the Low Average range on the immediate recall, delayed recall, and delayed recognition (she had to choose the correct answer from a set of options, a form of cuing) conditions. Her performance on a task which required her to retain non-contextual, non-meaningful information presented over multiple trials (Verbal Learning) placed her immediate free recall, delayed free recall, and delayed recognition memory in the Average range of functioning.

[REDACTED]'s immediate and delayed visual memory fell in the Very Low and Average ranges, respectively (Visual Memory Immediate = 73, 4th percentile; Visual Memory Recognition = 90, 25th percentile). On a visual memory task which incorporated visual-motor abilities (Design Memory), [REDACTED] performed in the Low Average range on the immediate recall and delayed recognition conditions. On a task which required her to memorize complex scenes and identify altered elements between scenes (Picture Memory), [REDACTED] performed in the Very Low range on the immediate recall condition and in the Average range on the corresponding recognition condition.

The D-KEFS is comprised of multiple tests that assess various aspects of executive functioning. The Trail Making Test consists of a visual cancellation task and a series of connect-the-circle tasks. [REDACTED] performed in the High Average range of functioning on a test of visual scanning and visual attention (Visual Scanning). [REDACTED] performed in the High Average range on a task which required her to sequence numbers within the format of a visual-motor task (Number Sequencing) and in the Very High range on a task which required her to sequence letters within the format of a visual-motor task (Letter Sequencing). She performed in the Average range on a measure of motor speed (Motor Speed). All of these tasks serve to establish baseline levels of visual scanning/attention and motor speed for the executive functioning task, Number-Letter Switching; Jenna performed in the Average range on this measure of cognitive flexibility, which is necessary for multitasking, simultaneous processing, and divided attention.

[REDACTED] performed in the Very Low range on two baseline conditions of the D-KEFS Verbal Fluency Test (Letter Fluency and Category Fluency). [REDACTED] performed in the Low Average (word retrieval) to Average (Category Switching) ranges on the third condition which required her to switch between two categories, evaluating cognitive flexibility and recall.

[REDACTED] performed in the Low Average (Color Naming) and Average (Word Reading) ranges on the two baseline conditions of the D-KEFS Color-Word Interference Test. [REDACTED] performed in the Average range on the third condition (Inhibition), for which the examinee must inhibit reading the words in order to name the dissonant ink colors in which those words are printed. Finally, [REDACTED] performed in the High Average range on the Inhibition/Switching condition, which requires the examinee to switch back and

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forth between naming the dissonant ink colors and reading the words, evaluating both inhibition and cognitive flexibility.

The D-KEFS Sorting Test isolates and measures multiple components of concept-formation and problem-solving abilities. On the Free Sorting condition, [REDACTED]'s correct categorizations and her ability to describe her reasoning placed her in the Average and High Average ranges, respectively.

[REDACTED] performed in the High Average range on the D-KEFS Twenty Questions Test, a measure of efficiency of problem solving and thinking ability, including the abilities to categorize and incorporate feedback into the examinee's mental schema of the problem. [REDACTED] performed in the Low Average range on a measure of spatial planning, rule learning, inhibition of impulsive and perseverative responding, and the ability to establish and maintain the instructional set (the D-KEFS Tower Test).

The D-KEFS Proverb Test consists of eight sayings that are presented in two formats for the examinee to interpret abstract principles and concepts: Free Inquiry and Multiple Choice. [REDACTED] performed in the High Average range of functioning on the Free Inquiry condition. Jenna performed at 100% accuracy on the Multiple Choice condition.

The Conners Continuous Performance Test 3rd Edition (Conners CPT 3) assesses (visual) attention-related problems. She made a noise like a gasp during the test and explained that the test did "stress me out!" [REDACTED] demonstrated some difficulty differentiating targets from non-targets (Detectability = 55). She demonstrated a very high rate of missed targets compared to her peers (Omissions = 90). She demonstrated a below average rate of incorrect responses to non-targets, demonstrating good performance (Commissions = 34). She had an average rate of random, repetitive, or anticipatory responses (Perseverations = 46). She demonstrated a slightly slow mean response speed and above average consistency in reaction times (HRT = 58; HRT SD = 41). Reaction time consistency and ability to sustain response speed in later blocks could not be calculated due to too few hits. She showed a good ability to sustain or increase response speed at longer intervals (HRT ISI Change = 42). In summary, relative to the normative sample, [REDACTED] made more omission errors, demonstrating some indication of issues related to inattentiveness, sustained attention, and vigilance.

The Conners Continuous Auditory Test of Attention (Conners CATA) assesses auditory processing and attention-related problems. She stood during this test (by choice). She also turned the volume down, explaining that she has been told that she is sensitive to sound. [REDACTED] demonstrated an Average ability to differentiate targets from non-targets (Detectability = 49). She had a below average rate of missed targets, indicating good performance (Omissions = 44). She demonstrated an Average rate of incorrect responses to non-targets (Commissions = 48). She demonstrated an Average rate of incorrectly responding before the target (Perseverative Commissions = 46). She had a Slightly Fast mean response speed (HRT = 40). She demonstrated Average consistency in reaction time (HRT SD = 50) and a Substantial reduction in response speed in later blocks (HRT Block Change = 64). Relative to the normative sample, [REDACTED] responded faster and displayed more of a reduction in response speed in later blocks. Overall, Jenna has a total of 2 atypical T-scores, which is associated with a moderate likelihood of having a disorder characterized by attention deficits, such as ADHD. [REDACTED]'s response pattern does indicate a possible issue with sustained attention (some indication).

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[REDACTED] and Mrs. [REDACTED] completed the Behavior Rating Inventory of Executive Function Second Edition (BRIEF-2), which assesses everyday behavior associated with specific domains of executive functions. Executive functions are a collection of behaviors and skills that are responsible for guiding, directing, and managing cognitive, emotional, and behavioral functioning. They include controlling impulses, initiating new behaviors, selecting relevant task goals, planning and organizing, shifting problem solving strategies when necessary, and monitoring and evaluating behavior. [REDACTED] endorsed *at-risk* levels of difficulty with *shifting* (e.g., often – I have trouble getting used to new situations, I have trouble thinking of a different way to solve a problem when I get stuck), *working memory* (e.g., often – I have trouble remembering things even for a few minutes, I forget instructions easily; never – I forget to hand in my homework, even when it's completed), and *task-completion* (e.g., often – I have trouble finishing tasks; sometimes – I am slower than others when completing my work). Mrs. [REDACTED] reported all scales within normal limits.

In order to assess [REDACTED]'s attention and concentration, the Behavior Assessment System for Children – Third Edition (BASC-3) was administered to [REDACTED] and Mrs. [REDACTED]. Both raters ranked Attention, Hyperactivity, Aggression, and Conduct Problems within normal limits.

Social-Emotional and Adaptive Functioning

Social-emotional and adaptive functioning were evaluated through the BASC-3 and the Revised Children's Manifest Anxiety Scale, Second Edition (RCMAS-2).

[REDACTED]'s BASC-3 results should be interpreted with caution due to an elevated F Index, indicating a negative overall view of her thoughts, feelings, and behaviors. Scale scores in the clinically significant range suggest a high level of maladjustment; scores in the *at-risk* range may identify a significant problem that may not be severe enough to require formal treatment or may identify the potential of developing a problem that needs careful monitoring. On the BASC-3, [REDACTED] endorsed clinically significant levels of difficulty with depression (e.g., true – I used to be happier, I don't seem to do anything right, nothing about me is right; almost always – I feel like I have no friends, no one understands me; often – I feel lonely), interpersonal relations (e.g., true – I have a hard time making friends, my classmates don't like me; almost always – other kids hate to be with me; often – I feel that nobody likes me), and self-esteem (e.g., false – I like who I am, I feel good about myself; never – I'm happy with who I am, I have confidence in myself; true – I wish I were different; almost always – my looks bother me). [REDACTED] also endorsed *at-risk* levels of difficulty with *attitude to school* (e.g., true – I don't like thinking about school; false – I don't care about school; never – my school feels good to me; almost always – school is boring), *attitude to teachers* (e.g., false – my teacher understands me, my teacher cares about me; never – my teacher is proud of me, my teacher gets mad at me for no good reason, teachers look for the bad things that you do; almost always – I get along with my teacher), *social stress* (e.g., true – my friends have more fun than I do, other children are happier than I am; almost always – I feel out of place around people, I feel that others do not like the way I do things; often – I am lonely), *sense of inadequacy* (e.g., true – I never seem to get anything right; almost always – when I take tests I can't think, I want to do better but I can't; often – I fail at things, even when I try hard I fail), *somatization* (e.g., true – often I feel sick in my stomach, I get sick more than others), and *self-reliance* (e.g., false – if I have a problem I can usually work it out; never – my friends come to me for help; sometimes – I can solve difficult problems by myself, I am good at making decisions). Mrs. [REDACTED] endorsed an *at-risk* level of difficulty with *anxiety* (e.g., almost always – says "tests make me nervous"; often – worries, is easily stressed, worries about making mistakes). In the narrative portion of the BASC-3, Mrs. Humcke wrote that "[REDACTED] is an affectionate, smart, thoughtful girl. She is very passionate about things that she feels are important. [REDACTED]"

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loves her family and she will always have a strong bond with her brothers." Regarding concerns, Mrs. [REDACTED] explained, "I'm concerned about [REDACTED] spending too much time thinking/worry about things. Although things have improved, [REDACTED] still spends too much time alone. She needs a friend she can rely on, spend time with and with whom she can confide in. She is very opinionated which can be good but also sometimes difficult."

[REDACTED] completed the RCMAS-2, a standardized self-report measure, which assesses worry, stress, and fear that can lead to academic difficulties and other problems. She endorsed an *at-risk* level of *overall anxiety* (T = 62). This total score was made up of physiological anxiety (within normal limits), worry (within normal limits), and *social anxiety (at-risk; e.g., I fear other kids will laugh at me in class, I feel someone will tell me I do things the wrong way, others seem to do things easier than I can, I feel alone even when there are people with me, I am afraid to speak up in a group, I worry about being called on in class).*

CLINICAL IMPRESSIONS

[REDACTED] is a 16-year-old female referred by her school district and her attorney (Ms. Julie Warshaw) for a private psychoeducational evaluation to guide school placement decisions and academic recommendations. [REDACTED] is a rising eleventh grader. She earns mostly A's and B's. No behavioral problems have been reported at home or at school (other than anxiety preventing her from going/staying in school). [REDACTED] is socially isolated and does not have friends. In September 2016, [REDACTED] was admitted to ICCPC's partial hospital program after presenting with suicidal ideation. Mrs. [REDACTED] explained that [REDACTED] is very hard on herself and typically thinks that her efforts are "not good enough" which negatively impacts her social and academic success. [REDACTED] has been receiving home instruction since 10/24/16 and a 504 plan was implemented for her effective 12/7/16. She has attempted to return to school several times but her anxiety has impeded her doing so. She has been diagnosed with Depression and Anxiety. [REDACTED] is currently prescribed Wellbutrin (150mg) and Prozac (15mg) and undergoes weekly outpatient group therapy for anxiety, depression, and social skills. [REDACTED] stated that she wants to resume school. When asked what makes a good school for her, [REDACTED] stated that she would like a small school that does not have too many people and where the teachers care about her.

[REDACTED] achieved a Full Scale IQ score of 99 (Average range, 47th percentile); [REDACTED] achieved a General Ability Index (GAI) score of 108, estimating her overall cognitive functioning to be in the Average range (70th percentile). GAI is a summary score that is less sensitive to the influence of working memory and processing speed and may be a better representation of Jenna's intelligence than the FSIQ. Her Verbal Comprehension, Perceptual Reasoning, and Processing Speed were each measured in the Average range of functioning. Her Working Memory was measured in the Low Average range of functioning, representing an area of relative weakness. Processing Speed also represented an area of relative weakness (PSI was statistically significantly lower than VCI and PRI). This was consistent with relatively weaker performance on timed tasks across the various evaluation instruments, particularly in math and oral fluency or retrieving and expressing ideas quickly (e.g., WIAT-III oral word fluency and math fluency; D-KEFS letter fluency, category fluency, color naming). Anecdotally, she also worked slowly and thoughtfully during testing; on timed tasks, she sometimes gave her answer just as time expired or after time already expired. Therefore, [REDACTED] would benefit from extended time on tests and other tasks across subjects.

Of note, the WAIS-IV was administered 6.5 months after [REDACTED]'s last administration of the same intelligence test. Practice guidelines suggest waiting at least six months between administrations. One

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particular study in which the researchers administered the WAIS-IV to the same participants 3 and 6 months apart indicates that "prior exposure to the WAIS-IV results in significant score increments. These gains reflect practice effects instead of genuine intellectual changes" (Estevis, Basso, and Combs, 2012). However, [REDACTED]'s performance on the most recent WAIS-IV was consistent with or slightly lower than her January performance and thus is believed to be a valid estimate of [REDACTED]'s current functioning. Please see table below for comparative scores.

WAIS-IV Index/Subtest	Standard Score	Standard Score
Full Scale (FSIQ)	104	99
General Ability Index (GAI)		108
Verbal Comprehension (VCI)	116	108
Similarities	11	12
Vocabulary	13	9
Information	15	14
Perceptual Reasoning (PRI)	107	107
Block Design	9	10
Matrix Reasoning	11	12
Visual Puzzles	14	12
Working Memory (WMI)	86	80
Digit Span	6	7
Arithmetic	9	6
Processing Speed (PSI)	94	92
Symbol Search	5	8
Coding	13	11

[REDACTED]'s academic achievement was generally consistent with, or surpassed, her age, education, and GAI, with the exception of Math Fluency.

Her overall oral language skills placed her in the Average range. Her expressive and receptive language placed her in the Average and High Average ranges, respectively.

[REDACTED]'s overall reading skills placed her in the Average range. Her phonological awareness and single word reading were measured in the Average and High Average ranges, respectively. Her reading comprehension was measured in the Average (open-ended) to High Average (multiple choice) ranges, which represented fifth grade and college sophomore equivalence, respectively, demonstrating great variability. Her oral reading fluency was measured in the Average range while her silent reading rate was measured in the High Average range.

Her written expression placed her in the Average range. Her spelling was measured in the Average range. Her sentence and essay composition placed her in the High Average and Average ranges, respectively.

[REDACTED]'s untimed math achievement placed her in the High Average range (81st percentile) while her timed math skills placed her in the Low Average range of functioning (23rd percentile), representing a statistically significant difference, and demonstrating that she benefits from extended time in order to demonstrate her full (advanced) mathematics knowledge. Furthermore, her math fluency performance was

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significantly lower (≥ 2 standard deviations) than predicted by her GAI. Therefore, [REDACTED] meets criteria for a diagnosis of Specific Learning Disorder with impairment in mathematics, specifically with fluent calculation, Moderate. Of note, her (untimed) math skills surpassed scores predicted by her GAI; therefore, on this evaluation, [REDACTED] is excelling in (untimed) math.

[REDACTED]'s memory performance was variable and inconsistent within and between measures. As discussed above, her WMI was an area of relative weakness (WMI = 80, 9th percentile). [REDACTED]'s immediate recall and delayed recognition verbal memory placed her in the Low Average range. Contrary to intuition, she performed better on a memory task which required her to retain non-contextual, non-meaningful information presented over multiple trials (Verbal Learning) than on a task which required her to remember contextual information presented in a story form; she may have benefitted from multiple trials (being exposed to the information multiple times) and/or the story format had too much information and made it more difficult for [REDACTED] to pick out and remember the most salient parts. [REDACTED]'s immediate and delayed visual memory placed her in the Very Low and Average ranges, respectively. Her immediate and delayed memory for paired associates learning (verbal-visual associate memory or pairing a word with a symbol) was measured in the Average range. She appeared to benefit from having verbal and pictorial information paired together and possibly also from multiple exposures to the information.

On standardized assessment (D-KEFS), [REDACTED]'s executive functioning skills fall in the Low Average to High Average ranges. On a test of sustained visual attention (CPT3), relative to the normative sample, [REDACTED] made more omission errors, demonstrating some indication of issues related to inattentiveness, sustained attention, and vigilance. On a test of sustained auditory attention (CATA), relative to the normative sample, [REDACTED] responded faster and displayed more of a reduction in response speed in later blocks, indicating some issues with sustained attention. On standardized report measures, [REDACTED] endorsed elevated levels of difficulty with shifting, working memory, task-completion, attitude to school, and attitude to teachers. Mrs. [REDACTED] did not endorse any difficulties with executive functioning on standardized report measures. During the background interview, [REDACTED] and her mother denied difficulties with careless errors, sustained attention, distraction, follow-through, organization, losing things, hyperactivity, or impulsivity.

On a standardized report measure, [REDACTED] endorsed an elevated level of difficulty with somatization, social stress, interpersonal relations, depression, self-esteem, self-reliance, and sense of inadequacy. Mrs. [REDACTED] endorsed an elevated level of anxiety. Mrs. [REDACTED] explained that [REDACTED] is very hard on herself and typically thinks that her efforts are "not good enough" which negatively impacts her social and academic success. These automatic negative thoughts seem to be feeding depression and anxiety. [REDACTED] continues to meet criteria for Major Depressive Disorder, Recurrent Episode, Moderate and Generalized Anxiety Disorder. Of note, depression and anxiety can negatively impact memory and processing speed ([REDACTED]'s relative weaknesses according to two evaluations, both conducted during active depressive episodes with anxiety).

[REDACTED] turned the volume down significantly during the CATA, explaining that she has been told that she is sensitive to sound. It is possible that this hypersensitivity to noise is contributing to feeling overwhelmed and anxious in school, which tends to be a noisy environment. Please see recommendations for suggestions for how to accommodate [REDACTED] here to optimize her functioning.

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[REDACTED] is a kind, intelligent, articulate, thoughtful young woman. Please see recommendations below to help her achieve her fullest, and great, potential.

DIAGNOSIS

- F81.2 Specific Learning Disorder with impairment in mathematics, specifically with fluent calculation, Moderate
 F33.1 Major Depressive Disorder, Recurrent Episode, Moderate
 F41.1 Generalized Anxiety Disorder

RECOMMENDATIONS

1. It is recommended that this report be shared with [REDACTED]'s school and treatment providers and standardized testing agencies.
2. [REDACTED] would benefit from a small school and small classroom environment where she can get extra support for her emotional and academic needs. This classroom should still be academically vigorous as [REDACTED]'s ability and achievement scores are generally at or above normal limits. In light of relative weakness in PSI, math fluency, oral fluency, anxiety, and depression, [REDACTED] may need some extra time to process information and formulate and express an answer. It is important to give her this time and give her opportunities to seek clarification; to start, this may include writing her question on a post-it note on her desk that a teacher's assistant walks around and sees and addresses so she does not need to raise her hand and speak in front of the class which causes her too much anxiety at this time. Similarly, do not call on [REDACTED] if she is not raising her hand or require her to speak in front of the class; work with her therapist to gradually expose her to these fears and build her competency. To support her relative weaknesses, [REDACTED] can benefit from the following supports.
3. [REDACTED] is reportedly (and noticeably) hypersensitive to noise. Therefore, she would benefit from the following recommendations:
 - a. A thorough Central Auditory Processing Disorder (CAPD) evaluation. These are typically conducted by an audiologist in private practice or in a hospital with an audiology department (such as Children's Specialized Hospital or CHOP).
 - b. [REDACTED] may benefit from access to noise-cancelling headphones and/or headphones with music as needed in order to cope with loud and overwhelming settings and situations.
 - c. [REDACTED] would benefit from being able to take breaks when needed and go to a designated quiet space when she is overwhelmed (e.g., guidance department office even if she does not want to talk). Gradually decrease how often she can use this, in conjunction with her therapist.
 - d. Similarly, because cafeterias can be very noisy, she may benefit from a quiet setting with a small group of students to eat her lunch. This will help with becoming over-stimulated but also with social skills and social anxiety and feeling like she has a group in the school.
4. Testing accommodations:
 - a. In light of a relative weakness in Processing Speed and math fluency (clinically significant discrepancy between timed and untimed math), anxiety, and depression, [REDACTED] would benefit from extended time on tests (at least time-and-a-half) in all subjects.
 - b. A separate, distraction-free testing room so she is not bothered by noises and other extraneous stimuli (hypersensitive). This will also allow her from becoming agitated when others turn in their tests before she does.
 - c. Breaks if she gets anxious or overwhelmed.

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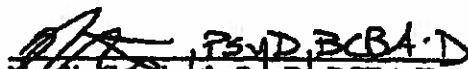
- d. Instructions should be presented in writing and should be available for [REDACTED] to refer back to in light of variable memory.
5. [REDACTED] meet criteria for a diagnosis of Specific Learning Disorder with impairment in mathematics, specifically fluent calculation, Moderate. Therefore, she would benefit from the following accommodations:
 - a. Because [REDACTED] has difficulties with math fluency, allow her to complete every other math problem for homework/classwork in order to check for understanding while decreasing unnecessary frustration.
 - b. Allow extra time (time-and-a-half) for math tests.
6. In regards to memory, [REDACTED] appeared to benefit from having verbal and pictorial information paired together and possibly also from multiple exposures to the information. Do not include too much extraneous information because [REDACTED] has some difficulties picking out the most salient points.
7. [REDACTED] would benefit from counseling/support as needed in school. It would be helpful to have someone check in on her adjustment regularly and assist in connecting her with peers that she may connect with. To this end, she would benefit from a social skills group (like a "lunch bunch") to help make and maintain friendships in school.
8. In light of background information and current testing results, [REDACTED] would benefit from the following academic accommodations:
 - a. Preferential classroom seating (front of class away from anything noisy such as a heating system).
 - b. Reduce the assignment length and strive for quality (rather than quantity) when applicable).
 - i. In math, this may mean doing only every other problem in order to demonstrate mastery of the concept, without causing unnecessary frustration and while leaving time and energy for other tasks.
 - ii. For writing assignments, consider modifying page requirements.
 - iii. *Do not grade her or penalize her based on completion time!*
 - c. Due to variable processing speed and accuracy, [REDACTED] would benefit from receiving an outline or complete copy of class notes ahead of time so that she can simply fill in a few details during the lecture and stay engaged. Similarly, minimize unnecessary copying from the board. In college, she would benefit from a note taker. Also, allow her to use assistive technology such as a tablet or laptop to complete work and to take notes in class.
 - d. Unfamiliar information and materials should be presented in small, manageable "chunks" and at a controlled rate. Similarly, unfamiliar skills should be taught through demonstration and guided practice, which are only then followed by independent practice or review.
 - e. Give clear, concise directions. Provide a model. Post the model and refer to it often.
 - f. Instructions should be written down in light of [REDACTED]'s memory inconsistencies.
 - g. Tasks should also be paced according to [REDACTED]'s level of mastery to guarantee a high rate of success.
 - h. [REDACTED] will benefit from highly structured, explicit, step-by-step strategies when learning new academic procedures. The last step of any such strategy should always include some method of checking the result. In addition, frequent repetition and rehearsal of to-be-learned material will be important.

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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- i. When necessary, help [REDACTED] break longer tasks into shorter segments. Plan on providing extra support and guidance for long-term, multi-step assignments requiring organization. Teach [REDACTED] to set clear timelines of what she needs to do to accomplish each step (monitor her progress frequently).
 - j. Coach [REDACTED] in monitoring her own behavior (e.g., making checklists and writing reminders for herself, setting alarms on her phone).
 - k. Increase the frequency of positive reinforcement at home and school (catch [REDACTED] doing something right and let her know it). Reinforce effort and not final outcome/grades.
9. Individuals with depression and anxiety symptoms often benefit from behavioral and psychopharmacology interventions. Therefore, it is recommended that [REDACTED] continue psychotherapy and medication management. Individuals with her profile tend to benefit from a Cognitive Behavioral Therapy (CBT) approach, with special attention to:
- a. Distress tolerance and coping with anxiety and depression
 - b. Building positive self-image
 - c. Noticing and challenging automatic negative thoughts
 - d. Emotion regulation
 - e. Interpersonal effectiveness
 - f. Social skills training
10. [REDACTED] may benefit from a re-evaluation in 2-3 years to evaluate treatment progress and determine updated recommendations for college.
11. [REDACTED]'s parents are referred to the following resources to provide additional information about her diagnoses. In addition, we recommend that the family rely on their own support systems as much as possible, as raising a child with depression, anxiety, and learning difficulties can be very challenging for parents.
- a. The Statewide Parent Advocacy Network (SPAN) can be helpful a source of information and support: 1-800-654-SPAN; www.spannj.org
 - b. National Alliance for Mental Illness (NAMI) Mercer provides education and support for individuals and families affected by mental illness - www.namimercer.org
 - c. Mom 2 Mom Helpline (a division of Rutgers UBHC) 1-877-914-6662, <http://www.mom2mom.us.com/>
 - d. New Jersey Children's System of Care, managed by Perform care. If eligible, you may receive Family Supports such as respite care or assistance with camp. (1-877-652-7264; www.performcare.org)

It was a pleasure working with [REDACTED] and her family. If there are further questions or the need for consultation regarding the findings of this evaluation, please do not hesitate to call us at (609) 419-0400.


 Natalie Schuberth, Psy.D., BCBA-D
 Licensed Psychologist, License #5563

8/21/17
 Date

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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Scoring Appendix

Classification Level	Percentile Rank	Standard Score	2S Standard Score	1S Standard Score
Extremely High	≥ 98	≥ 130	≥ 16	≥ 70
Very High	91-97	120-129	14-15	63-69
High Average	75-90	110-119	12-13	57-62
Average	25-74	90-109	8-11	43-56
Low Average	9-24	80-89	6-7	37-42
Very Low	2-8	70-79	4-5	30-36
Extremely Low	< 2	< 70	1-3	< 30

Intellectual Functioning

Wechsler Adult Intelligence Scale -- Fourth Edition (WAIS-IV)

Subtest	Standard Score	2S Standard Score	1S Standard Score
Full Scale (FSIQ)	99	47	Average
General Ability Index (GAI)	108	70	Average
Verbal Comprehension (VCI)	108	70	Average
Similarities	12		High Average
Vocabulary	9		Average
Information	14		Very High
Perceptual Reasoning (PRI)	107	68	Average
Block Design	10		Average
Matrix Reasoning	12		High Average
Visual Puzzles	12		High Average
Working Memory (WMI)	80	9	Low Average
Digit Span	7		Low Average
Arithmetic	6		Low Average
Processing Speed (PSI)	92	30	Average
Symbol Search	6		Low Average
Coding	11		Average

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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Academic FunctioningWechsler Individual Achievement Test—Third Edition (WIAT-III)

Composite/Subtest	Score	Percentile	Standard Error	Age	Functioning
Oral Language Composite	104	61			Average
Listening Comprehension	114	82	>12.9	>19:11	High Average
Receptive Vocabulary	118	88			High Average
Oral Discourse Comprehension	104	61			Average
Oral Expression	93	32	7.8	13:1	Average
Expressive Vocabulary	99	47			Average
Oral Word Fluency	87	19			Low Average
Sentence Repetition	98	45			Average
Total Reading Composite	103	58			Average
Basic Reading	108	70			Average
Reading Comprehension and Fluency	98	45			Average
Word Reading	113	81	>12.9	>19:11	High Average
Pseudoword Decoding	105	63	>12.9	>19:11	Average
Reading Comprehension	92	30	5.7	11:4	Average
Oral Reading Fluency	106	66	12.9	>19:11	Average
Oral Reading Accuracy	97	42	10.2	15:0	Average
Oral Reading Rate	105	63	12.7	>19:11	Average
Written Expression Composite	108	70			Average
Sentence Composition	115	84	>12.9	>19:11	High Average
Sentence Combining	120	91			Very High
Sentence Building	107	68			Average
Spelling	105	63	12.4	>19:11	Average
Essay Composition	101	53	9.8	16:0	Average
Word Count	107	68			Average
Theme Development and Text Organization	94	34			Average
Mathematics Composite	113	81			High Average
*Math Fluency	89	23			Low Average
Math Problem Solving	117	87	>12.9	>19:11	High Average
Numerical Operations	107	68	>12.9	>19:11	Average
Math Fluency—Addition	92	30	8.4	13:4	Average
*Math Fluency—Subtraction	86	18	6.1	11:4	Low Average
Math Fluency—Multiplication	92	30	7.2	13:0	Average

Norms based on age

*Indicates score that is significantly (≥ 2 standard deviations) different from GAI

not recognized by code. 6A:14-3.5(c)(12)(i)(5)-(6)

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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Nelson-Denny Reading Test

Component/Subtest	Percentile Rank	Grade Equivalent	Range of Functioning
Vocabulary			
Standard Time	86	14.6	High Average
Extended Time	85	14.5	High Average
Comprehension			
Standard Time	78	14.4	High Average
Extended Time	59	12.4	Average
Total			
Standard Time	83	14.6	High Average
Extended Time	77	13.9	High Average
Reading Rate	84		High Average

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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Executive Functioning/Learning/Memory

Wechsler Intelligence Scale for Children – Fifth Edition (WISC-V)

Index/Subtest	Standard Score	Range of Functioning
<i>Optional Subtests</i>		
Immediate Symbol Translation	95	Average
Delayed Symbol Translation	108	Average

Wide Range Assessment of Memory and Learning, Second Edition (WRAML2)

Index/Subtest	Standard Score	Percentile	Range of Functioning
Screening Memory	76	5	Very Low
General Recognition Memory	87	19	Low Average
Verbal Memory - Immediate Recall Total	85	16	Low Average
Verbal Memory - Recognition Total	88	21	Low Average
Story Memory			
Immediate Recall	7		Low Average
Delayed Recall	7		Low Average
Recognition	6		Low Average
Verbal Learning			
Immediate Recall	8		Average
Delayed Recall	10		Average
Recognition	10		Average
Visual Memory - Immediate Total	73	4	Very Low
Visual Memory - Recognition Total	90	25	Average
Design Memory			
Immediate	6		Low Average
Recognition	6		Low Average
Picture Memory			
Immediate	5		Very Low
Recognition	11		Average

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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Della-Kaplan Executive Function System (D-KEFS)

Subtest	Score	Percentile/Qualifying
Visual Scanning	12	High Average
Number Sequencing	13	High Average
Letter Sequencing	14	Very High
Number-Letter Switching	11	Average
Motor Speed	11	Average
Letter Fluency	4	Very Low
Category Fluency (Alternate Form)	5	Very Low
Category Switching: Correct Responses	6	Low Average
Switching Accuracy	8	Average
Color Naming	7	Low Average
Word Reading	11	Average
Inhibition	8	Average
Inhibition/Switching	13	High Average
Free Sorting - Description Score	10	Average
Correct Sorts	13	High Average
Total Weighted Achievement	12	High Average
Total Achievement Score	7	Low Average
Free Inquiry	13	High Average

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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Conners Continuous Performance Test 3rd Edition (CPT3)

Detectability	d'	55	High Average
Error Type	Omissions	90	Very Elevated
	Commissions	34	Low
	Perseverations	46	Average
	Hit Reaction Time (HRT)	58	A Little Slow
Reaction Time Statistics	HRT Standard Deviation	41	Low
	Variability	?	?
	HRT Block Change	?	?
	HRT ISI Change	42	Low

Conners Continuous Auditory Test of Attention (CATA)

Detectability	d'	49	Average
Error Type	Omissions	44	Low
	Commissions	48	Average
	Perseverative Commissions	46	Average
	Hit Reaction Time (HRT)	40	A Little Fast
Reaction Time Statistics	HRT Standard Deviation	50	Average
	HRT Block Change	64	Elevated

Behavior Rating Inventory of Executive Functioning, Second Edition (BRIEF2)

Global Executive Composite (GEC)	56		50	
Behavioral Regulation Index (BRI)	47		44	
Inhibit	45		44	
Self-Monitor	51		45	
Emotion Regulation Index (ERI)	57		57	
Shift	64	*	58	
Emotional Control	47		56	
Cognitive Regulation Index (CRI)	60	*	49	
Initiate	-		57	
Working Memory	65	*	47	
Plan/Organize	50		56	
Task-Monitor	-		44	
Organization of Materials	-		39	
Task-Completion	65	*	-	

* at-risk / ** clinically significant

PATIENT NAME: [REDACTED]
 DATE OF BIRTH: [REDACTED]
 PSYCHOEDUCATIONAL EVALUATION

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Social, Emotional, and Behavioral Functioning

Behavior Assessment System for Children, Second Edition (BASC-3)

Scale	Score	Parent	Teacher
Attitude to School	66	*	-
Attitude to Teachers	63	*	-
Sensation Seeking	45	-	-
Atypicality	52	-	44
Withdrawal	-	-	48
Locus of Control	51	-	-
Social Stress	64	*	-
Anxiety	46	-	62
Depression	71	**	58
Sense of Inadequacy	64	*	-
Somatization	69	*	56
Attention Problems	45	-	42
Hyperactivity	38	-	39
Aggression	-	-	47
Conduct Problems	-	-	41
Relations with Parents	54	-	-
Interpersonal Relations	13	**	-
Self-Esteem	18	**	-
Self-Reliance	39	*	-
Adaptability	-	-	38
Social Skills	-	-	39
Leadership	-	-	39
Activities of Daily Living	-	-	57
Functional Communication	-	-	49
School Problems	61	*	-
Externalizing Problems	-	-	42
Internalizing Problems	62	*	60
Inattention/Hyperactivity	41	-	-
Emotional Symptoms Index	69	*	-
Behavioral Symptoms Index	-	-	53
Personal Adjustment	26	**	-
Adaptive Skills	-	-	44

* elevated F Index; interpret with caution

* at-risk / ** clinically significant

For clinical scales, higher scores indicate areas of difficulty
 For adaptive scales, lower scores are indicative of concern

PATIENT NAME: [REDACTED]
DATE OF BIRTH: [REDACTED]
PSYCHOEDUCATIONAL EVALUATION

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Revised Children's Manifest Anxiety Scale, Second Edition (RCMAS-2)

Index	Score	
Defensiveness	48	
Total	62	*
Physiological Anxiety	56	
Worry	56	
Social Anxiety	68	*

* at-risk / ** clinically significant



**Immediate Care
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www.NJPsychCenter.com

8.17.17

RE: [REDACTED]

To whom it may concern,

I am the clinician working with [REDACTED] here at ICCPC. I am writing this letter on behalf of [REDACTED]'s anxiety and how it affects her education. Throughout her time here, [REDACTED] struggled with anxiety in social situations and when under pressure. She has struggled in large with engaging in large group settings due to feeling overwhelmed and having thoughts that others were going to judge her for what she says. I was able to encourage [REDACTED] to try and attend school again for approximately two days last year. She continued to report anxiety due to the large population of students and the size of her classes. She was unable to complete her academic assignments due to the anxiety causing her confusion and delaying her ability to function in school. While in smaller group settings, I have noticed that [REDACTED] was able to progress in managing her anxiety. She became more open and engaged and identified that her anxiety lessened throughout time. I have worked with [REDACTED] for almost one full year and throughout that time, have seen her progress when she is in smaller settings where she can get more attention and feel less anxious. [REDACTED] is a very mature and bright person. She excels better when people around her are mature and college bound rather than peers who have behavioral issues. Throughout my time with her, [REDACTED] has never demonstrated any negative behaviors or came to program due to behavioral issues. She also does not respond well when others around her have behavioral issues as it distracts her and causes her to become anxious again. She also will be continuing treatment here at ICCPC throughout the school year and will not be in need of therapy while in school. She will need a structured but non - strict educational environment as she functions better with more flexible schedules. It is highly recommended that she be placed in a school that can meet these needs in order for [REDACTED] to function academically and succeed. If there are any further questions, please feel free to contact me. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to be 'Melissa Dolgos', is written over a horizontal line.

Melissa Dolgos, LAC
Senior Clinician
973-794-3281 X222
melissad@njpsychcenter.com



Alexander Road Associates

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MEDICATION MANAGEMENT
PSYCHOLOGICAL TESTING
FORENSIC EVALUATIONS
SCHOOL EVALUATIONS
ADD/ADHD EVALUATIONS
PSYCHOGENOMIC TESTING

December 13, 2017

RE: [REDACTED]

To Whom It May Concern:

I spoke with Ms. Julie Warshaw today and she asked for clarification of the psychoeducational evaluation that I wrote regarding [REDACTED] in the summer of 2017. The evaluation concluded that [REDACTED] meets criteria for a diagnosis of *F81.2 Specific Learning Disorder with impairment in mathematics, specifically with fluent calculation, moderate*. This is the language that is used in the *Diagnostic and Statistical Manual, Fifth Edition (DSM-5, American Psychiatric Association, 2013)* to code learning disorders, commonly referred to as *learning disabilities*. This specific learning disorder is also known as *Dyscalculia*. This used to also be known as *Mathematics Disorder (DSM-IV-TR, 2000)*.

I hope that this clarifies things. Please feel free to contact me if there is anything else I can do to help.

Sincerely,

Natalie Schubert, PsyD, BCBA-D
Licensed Psychologist, #5563

PLATT PSYCHIATRIC ASSOCIATES, L.L.C.

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General Psychiatry

Diplomate, American
Osteopathic Board of Neurology
and Psychiatry, General
Psychiatry

PSYCHIATRIC CONSULTATION FOR SCHOOL STAFF

This report was prepared for School Staff purposes only. Use for other purposes (e.g. custody, court appearance, etc.) may not be appropriate and is not sanctioned by the author.

NAME:

ADDRESS:

TELEPHONE:

**DATE OF
CONSULTATION:**

LOCATION OF CONSULTATION:

REFERRED BY:

**REASON FOR
REFERRAL:**

AGE:

DATE OF BIRTH:

SCHOOL:

9/6/17

Office

West Morris Central High
School Child Study Team, Case
Manager: Ms. Kendra
Dickerson, School Psychologist

To assess [REDACTED]'s psychiatric
status in order to determine
an appropriate classroom
placement.

West Morris Central High
School

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GRADE:

Rising 11th

CST CLASSIFICATION:

None

LIVING/PSYCHOSOCIAL
SITUATION:

lives with her parents and brothers in the family's 5-bedroom home. She has her own bedroom where she sleeps. The family has 2 cats, 1 dog and a fish.

FAMILY:

Mother: ; 57-years; teacher; reportedly in overall good health.

Father: ; 56-years; electrical engineer; reportedly in overall good health.

Brother: ; 24-years; resides in Williamsport, PA; employed; no problems reported.

Brother: ; 22-years; resides in Ewing, NJ; employed; no problems reported.

Brother: ; 20-years; Junior at TCNJ; no problems reported.

CHIEF COMPLAINT AND HISTORY OF THE PRESENTING PROBLEM

All historical information was obtained in an interview with mother and via review of all available Child Study Team referral material, including: a Social History by Ms. Betina Goldberg-Rappoport, School Social Worker, dated 1/18/17; a Psychological Evaluation by Ms. Sherry Wilks, School Psychologist, dated 1/19/17; a Psychiatric Evaluation by Dr. Shankar Srinivasan, dated 3/15/17; an IEP dated 4/6/17, a Letter written by Melissa Dolgos, LAC, Senior Clinician, dated 8/17/17; and a Psychoeducational Testing Report by Natalie Schuberth, Psy.D; BCBA-D, dated 8/21/17. is interviewed with her mother present.

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██████████ is a ██████████ month old female referred for psychiatric consultation as school staff is seeking to assess ██████████'s psychiatric status in order to determine an appropriate classroom placement. Mother reports that anxiety and depression have been present for quite some time, but emerged overtly in the fall of 2016.

According to the Social History by Ms. Betina Goldberg-Rappoport, School Social Worker, dated 1/18/17, throughout her school history ██████████ was a strong student with no history of learning issues. However, in 6th grade, ██████████ described starting to feel lonely; initially the feeling wasn't severe and she did have friends. As her brothers began to go away to college, she started to feel increasingly depressed. She had a close relationship with her brothers and felt protected and comfortable with them. However, in September, 2016, she told a friend that she felt suicidal.

Per the Psychoeducational Testing Report by Natalie Schubarth, Psy.D., BCBA-D, dated 8/21/17, as noted above, in the fall of 2016, ██████████ experienced suicidal ideation (September through December 2016). Mother reported ██████████ spent a lot of time in her room before October 2016. She tried to return to school multiple times but her anxiety was intensely triggered and she returned to home instruction. According to the Psychological Evaluation dated 1/19/17 by Ms. Sherry Wilks, School Psychologist, on 9/22/16 ██████████ was admitted to ICCPC for depression and anxiety, and subsequently attended the partial care program which included counseling and academic tutoring. ICCPC staff diagnosed ██████████ with Major Depressive Disorder, recurrent, severe, without psychotic features, and Generalized Anxiety Disorder. She was prescribed Prozac and Wellbutrin. ICCPC staff also recommended a smaller and more therapeutic environment so she could continue processing her anxiety and depression and improve her school functioning. She improved in the small, therapeutic school environment with individualized attention. On 10/17/16, she was released from the program and cleared to return to school. Home instruction started on 10/24/16 and a 504 Accommodation Plan was implemented on 12/7/16. As she placed a lot of pressure on herself and experienced fear of failure, a therapist reported that ██████████ continued to struggle with major anxiety related to school work, and depression with suicidal thoughts were also present. She experienced depression, lack of motivation and inability to function which impacted her ability to attend school.

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particularly in the context of high school where she felt judged, pressured and scared.

█████'s scores on the WAIS-IV were: FSIQ=104 (VCI=116, PRI=107, WMI=86, PSI=94) placing her in the Average range of intellectual functioning. On the BASC-2, █████ rated herself as not having any noteworthy difficulties in a number of areas, including sensation seeking, atypicality, locus of control, attention problems, hyperactivity, relations with parents, self-reliance, test anxiety, anger control and mania. However, she rated herself within the At-Risk range in Attitude Toward School, Social Stress, Anxiety, Depression, Sense of Inadequacy, Somatization, Self-esteem, and Ego Strength. █████ rated herself in the Clinically Significant range in Attitude Toward Teachers and Interpersonal Relations. Compared to her peers, Parent Rating indicated that she had typical adolescent behaviors in a number of areas including: hyperactivity, aggression, conduct problems, somatization, atypicality, attention problems, social skills, activities of daily living, anger control, bullying, emotional self-control, and executive functioning. She was rated in the At-Risk range in anxiety, adaptability, leadership, functional communication, social development, and negative emotionality. █████ was rated in the Clinically Significant range for depression, withdrawal and resilience. In addition to the aforementioned diagnoses she also had: Specific Learning Disorder with impairment in mathematics, specifically with fluent calculation, moderate.

█████ seemed to be doing well until January 2017 when she experienced a depressive relapse manifested with sadness, no motivation, loss of interest, hopelessness, suicidal ideation, and increased anxiety which was described as generalized worry and panic type symptoms. As she was unable to attend school, she was re-admitted to the ICCPC partial hospitalization program with diagnoses including Major Depression, recurrent; Panic Disorder and School issues. The Psychiatric Evaluation by Dr. Shankar Srinivasan, dated 3/15/17 indicated █████'s psychiatric issues included pervasive mood disturbances, avoidant behaviors even when not under stress, along with irrational fears and anxiety secondary to school issues; all of this collectively impacted learning and her ability to maintain and build satisfactory interpersonal relationships.

Subsequently the IEP dated 4/6/17 referenced a gradual transition to a less restrictive placement within the Mendham Behavioral Support Program for a half-day, afternoons only. █████ would continue to work towards completion of courses

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however and attempts would be made to conduct tutoring sessions within the school environment. In addition, there was a recommendation for [REDACTED] to transition to a small class setting within the behavioral support program for English with her peers. French and Chemistry would continue to be delivered through home instruction.

According to the Letter written by Melissa Dolgos, LAC, Senior Clinician at ICCPC, dated 8/17/17, [REDACTED] struggled with anxiety in social situations and when under pressure. She struggled in large group settings feeling overwhelmed and having thoughts that others were going to judge her for what she said. Anxiety interfered with [REDACTED] completing her academic assignments due confusion; this delayed her ability to function in school. She was better able to manage her anxiety in smaller groups and as she became more open and engaged her anxiety lessened over time. [REDACTED] was to continue treatment at ICCPC through the school year and was not expected to need therapy in school. Rather an educational environment with small school and classroom settings with increased flexibility in scheduling where extra support for her emotional and academic needs would be available.

The Psychoeducational Testing Report by Natalie Schubert, Psy.D, BCBA-D, dated 8/21/17, reiterates the history as noted above noting multiple attempts to return to school intensely triggered her anxiety and she returned to home instruction. In addition to the diagnoses already stated, Dr. Schubert also mentions: Specific Learning Disorder with impairment in mathematics, specifically with fluent calculation, moderate; Jenna is hypersensitive to noise. A thorough Central Auditory Processing evaluation was recommended.

Mother's understanding of the purpose of this consultation is to reassess [REDACTED]'s current psychiatric situation in the context of having previously been diagnosed with Generalized Anxiety Disorder and Major Depressive Disorder. Mother reviews much of the history noted above and relates an increasing pattern of school refusal and social withdrawal for the past several years. At the end of September of 2016, [REDACTED] confided in a friend that she wanted to kill herself and at which time outpatient psychotherapy was initiated with a social worker. Treatment ended after 2-3 weeks and by that point in time she missed 1-2 weeks of school stating she was unable to return to school. Based on a referral from a friend, soon thereafter, she started attending a partial hospitalization program at ICCPC through the middle of December of 2016. Medications included increasing doses of Wellbutrin with the eventual addition of Prozac which

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was effective; then in August of 2017 her current prescriber, a psychiatric nurse practitioner Evelyn Kaminski, NP, increased the Prozac by 5 mg which has been relatively effective, however, mother notes she still remains anxious, retreats to her room, and does not like anyone going into her room. Through this period she was unable to attend school, although she was able to complete school work while at ICCPC and later went on home instruction which started in December of 2016 and continued through to June of 2017. After her discharge from ICCPC in mid December of 2016 she did attend 2 full days of school (mother drove her) and after school she attended ICCPC IOP 3 days a week. After the second day of attending school she cried and told her mother "I can't go back, I can't go in there." Subsequently, she remained on home instruction for the remainder of the academic year. As noted above, the trial of a Behavioral Support Program in school was ineffective which mother believes was related to a nonspecific instructional approach in that classroom that would have required a great deal of self-direction; although, this was a smaller classroom, 2 teachers and 1 aide for approximately 10 students with emotional issues would not have been sufficient for [REDACTED].

She has not attended her district school since September, 2016 although, she has told her mother that she would like to be attending a school.

In regard to other behaviors, mother states that her self-care is excellent and she has a slightly reduced appetite, but not significantly so. She now virtually has no social life and seems to like to retreat to her room.

MEDICAL HISTORY

[REDACTED]'s last physical examination with Dr. Libert occurred in September of 2016. Present height: 5'6". Present weight: 115 lbs. She is reportedly in overall good health. She currently takes Prozac 15 mg daily and Wellbutrin 150 mg XR daily. A prior trial of Lexapro in September was ineffective and discontinued several weeks thereafter.

She experienced removal of wisdom teeth on 08/21/17; had an emergency room visit on 08/03/17 for a knee injury.

She is scheduled to have an audiological evaluation.

Her psychiatrist at ICCPC was Dr. Shrinivasin. Per the Psychoeducational Testing Report by Natalie Schuberth, Psy.D,

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BCBA-D, dated 8/21/17 family history is significant for high-functioning Asperger's disorder and high blood pressure.

She does not have much difficulty falling asleep or staying asleep and does sleep through the night.

Extended family medical history is significant for anxiety, OCD and depression.

DEVELOPMENTAL HISTORY

All aspects of early development including pregnancy, delivery, neonatal period, infancy, toddlerhood periods, the achievement of developmental milestones, and behavior in early childhood are all rated as occurring appropriately within typical timeframes.

's current gross motor coordination skills are rated as average across all domains.

's school experience relative to academic learning is rated as average.

's school experience relative to behavior is rated as good.

Mother believes that comprehends and understands situations as well as peers. She rates 's overall level of intelligence compared to peers as average.

School experience relative to academic learning is rated as good historically and average currently. School experience relative to behavior is rated as good both historically and currently.

She has become extremely anxious being at her high school, she experiences fears, phobias and has continued to refuse to go to school and at times when she has had to enter her high school she turns white and panics.

She is sought by peers for friendship, although in the past several years she has had issues with trust and being judged.

has never been involved with the police, involved in physical fights in or out of school, had access to firearms or other weapons, started a fire, had a police record, left home without permission, had any experience with firearms or other weapons, demonstrated cruelty to animals or expressed thoughts of seriously wanting to hurt someone else.

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tcke

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did express suicidal thoughts in September of 2016; there is report of homicidal ideation, plan, intent or prior gestures.

Her behavior at home is recorded as appropriate with no exaggerated or excessive types of interactions.

Her main interests and hobbies revolve around music, playing guitar and singing. She most enjoys being with her brothers. She most dislikes being forced into social situations.

MENTAL STATUS EXAMINATION, OBSERVATION OF AND INTERVIEW WITH JENNA

Jenna is a 5'6", 135 lb female who is well-groomed, and casually dressed in a grey suit (skirt and jacket) with a light orange shirt. She has long brown hair and hazel eyes. She is cooperative, but exceedingly anxious often sitting with her arms crossed. She is a cooperative participant in the interview, but eye contact is variable. Initially, she replies to all questions with some resistance, with somewhat truncated, and avoidant responses. Her initial resistance fades through the extensive interview as the session progresses.

Interestingly, though her descriptions become increasingly detailed, as initially there is an apathetic manner to her responses. She is, however, quite attentive. Anxious, she is seated initially with her arms crossed, moderately interested in the interview, sometimes evasive, often tense, initially largely ill-at-ease.

Behavior is tense with evidence of psychomotor retardation. She speaks hesitantly in a soft, slow, monotone voice.

Initially she projects a very empty, depressed mood which reduces somewhat as the session progresses. Throughout, she is exceedingly anxious and possibly fearful as she often looks in the distance. Her affect is flat, dysphoric and constricted and although she becomes more involved and more of a participant, her affect does remain constricted throughout the interview.

She denies a break with reality, hallucinations, derealization, depersonalization, or any unrealistic experiences. She is somewhat phobic of the school building and mentions one other atypical phobia. She speaks of being upset about a relative visiting, talking on the phone, which prevented her from going to sleep; she says, "I cried for an entire hour trying to plug my ears and trying to talk to myself and drown out the noise."

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PLATT PSYCHIATRIC

973-239-4784

10:05

Finally, she woke her mother up and mother intervened but she reports retaining residual fears about this. This event occurred two years ago.

Her mood is somewhat difficult to describe as she projects high degrees of anxiety, possible fearfulness, and some projection of emptiness with a hint of inappropriateness as well as depression. Affect is restrained. She often looks in the distance.

She denies ideas of reference. She may have some quasi-suspicious and mistrustful feelings entangled with some degree of agoraphobia as there have been periods when she did not want to leave the house; she mentions a time in May of 2017 which she did not leave the house for two weeks until one particular occasion when she had to go to therapy.

Thought processes can be tangential, but largely are goal directed. She has considered suicide by taking a bottle of Ibuprofen, which she never did, and denies other thoughts of self-harm or related behaviors. A couple of times when overwhelmed she hit herself as hard as she could. She says that for a very long time she has wanted to kill herself. In September of 2016 she was feeling overwhelmed, she hit herself as hard as she could, but not hard enough to actually cause damage. She has wanted to cut herself, but never has. The last time this occurred was in March of 2017 and she did have some bruises. She has done this when she felt trapped. She felt this way in particular last May when parents had a meeting at school and she sat outside the room for an hour "being freaked out."

She states that she "hated school since 6th grade" as she could not relate to kids, but also seems to attempt to neutralize this statement she adds that she thought everyone hated school. She recalls a particular incident in 6th grade that was very provocative for her. She had dreams/nightmares about going to middle school with worries about not being able to find her locker and not knowing where to go. She reports having had some nasty teachers and a few who she believes made fun of her. "They thought they were being funny made fun of my work" this occurred in 8th grade. She relates another incident from 6th grade when she believes a student was ridiculed.

She states that in 10th grade she told her mother she was depressed, mother wanted her to get help, she entered day treatment for approximately two months and this was helpful.

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However, in December, initially she felt confident in herself, thought she could go back to school and do well, but, "when I tried it was too painful and even though none of the other kids responded 'I responded negatively'." She also speaks of another problematic situation in Marching Band Camp in 9th grade.

She denies use of alcohol, drugs, and cigarettes. She also does not have difficulty falling asleep and denies continuity disturbances and nightmares. Eating is not an issue.

She has no idea of her goal for the future.

SUMMARY, CONCLUSIONS, AND REPORT OF FINDINGS

Preliminary findings are shared with mother. She is advised that after a review of all of the material, a final report will be issued to the Child Study Team. After this review, relevant information may be added that we did not have an opportunity to discuss. She is encouraged to call the Child Study Team with questions that can be forwarded to this office. She is also advised that she may be receiving a copy of the report from the Child Study Team.

██████ is a ████████ month old female referred for psychiatric consultation to assess ████████'s psychiatric status in order to determine an appropriate classroom placement.

██████ has a lengthy history of anxiety, depression and internalized conflict which is reported to have been noticed in 6th grade; however, there may have been earlier underpinnings of this. Her sense of emotional discomfort about how she was treated in school and her perceptions about how others were treated crescendoed during 8th, 9th and 10th grades. She reached the point of being extremely fearful of entering the school building appearing phobic; she describes becoming weak and unable to proceed upon approaching the school.

Mental status examination reveals a dearth of psychiatric information that raises questions about her overall stability. Although improved, she is tentative, highly anxious and extremely internalized which places her at risk for unanticipated behavioral displays as she has not worked through a significant number of her internal conflicts; some of which involves feelings about herself, feelings about others in her life comingled with anger, confusion and fear all which is fueled by her thinking patterns.

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She remains exceedingly emotionally fragile and the probability of her attending her school is extremely low at this time. She requires an academic environment with the capability of a great deal of emotional awareness and intervention.

Mother indicates that sometimes in the family she demonstrates upset with her brothers. Mother is urged to convey her description of impulsive and possibly erratic anger to her therapist and medication provider at ICCPC. If possible they should be offered the ability to review this report in order to determine if there is any additional relevant information about [REDACTED]'s thought processes especially in view of Dr. Srinivasan's concern about irrational fears in the context of pervasive mood disturbances and avoidant behaviors even when not under stress. Mother also mentions that [REDACTED] can become extremely angry for reasons that the rest of the family may not clearly understand; again, this suggests the possibility of some illogical conceptualizations. These descriptions suggest consideration of a thought disorder.

[REDACTED] is hypersensitive to noise. She would benefit from a thorough Central Auditory Processing Disorder calculation.

The Psychiatric Evaluation by Dr. Shankar Srinivasan, dated 3/15/17 indicated [REDACTED]'s psychiatric issues included pervasive mood disturbances, avoidant behaviors, even when not under stress, along with irrational fears and anxiety secondary to school issues; all of this collectively impacted learning and her ability to maintain and build satisfactory interpersonal relationships. Based on this assessment by Dr. Srinivasan and [REDACTED]'s current mental status examination, her medication should be reviewed and altered in an attempt to address the above noted mood disturbances, avoidant behaviors, irrational fears and subsequent anxiety and depression. Also ongoing psychiatric involvement is essential in concomitantly addressing, monitoring and limiting the symptoms noted.

Currently she meets DSM-V criteria for: H/O Major Depressive Disorder, recurrent episode, moderately severe (with irrational thinking); H/O Generalized Anxiety Disorder; H/O Panic disorder; School avoidance; Specific Learning Disorder with impairment in mathematics, specifically with fluent calculation, moderate; H/O Major Depressive Disorder, recurrent, severe, without psychotic features; R/O Central Auditory Processing Disorder; R/O Agoraphobia

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This consultation was completed for the purposes of a Child Study Team evaluation. Use for other purposes may not be appropriate. This is a time limited assessment.

Mother signed a release form specifying that doctor-patient confidentiality is not in effect for this consultation or any future consultations with school staff regarding this referral.

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RECOMMENDATIONS

1. [REDACTED]'s current mental status indicates that her medication program should be reviewed and possibly adjusted in an attempt to address her mood disturbances, avoidant behaviors, irrational fears and subsequent anxiety and depression. Medication modification may result in a change in Jenna's mental status and since [REDACTED] is not in school now, if there are medication changes, it may be useful to determine any possible improvement in her mental status prior to making a determination about classroom placement.
2. Classroom placement at the discretion of the Child Study Team bearing in mind that [REDACTED]'s situation requires an academic environment that is structured, monitored, and designed to accommodate to her academic needs and provide emotional support and therapeutic input. [REDACTED] could benefit from the opportunity for personalized attention to provide ego building and the emotional resources for her to better cope with peers, social anxiety and adjust her internal state. Without the above issues being addressed, the manner in which [REDACTED] deals with school is not likely to change. It is noted, however, that even the most supportive and structured classroom is not likely to have much impact unless there is evidence of clinical and interpersonal stabilization, which should be reassessed pending review by her clinical providers and possible modifications in her medication program.
3. Regular in school monitoring, to be arranged by school staff, by a trained staff person such as the school psychologist. This person could also act as a support for [REDACTED] if she is feeling overwhelmed.
4. Frequent liaison between treatment providers and school staff.
5. Mother should consider ongoing extensive psychiatric monitoring over time for diagnostic clarification and due to the fact that there may be changes in [REDACTED]'s mental status presentation in the future. [REDACTED]'s medication program requires review.
6. Both psychiatric and psychotherapeutic treatments are essential for [REDACTED] and must involve both individual and family components.

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7. Psychotherapy is mandatory for [REDACTED] and should include both individual and family components. Issues to be addressed include identification and verbal expression of feelings, exploration of her perception of traumatic events, ego building, social skills, and appropriate responsibility for consequences. It is important to note that an extensive exploration of family dynamics and process is essential.
8. When psychotherapeutically appropriate encouragement of [REDACTED]'s various interests and activities outside of school to foster and promote self-esteem and ego building. Participation in well-monitored structured extracurricular activities to foster group membership and peer relations as well as develop mastery and competence and help [REDACTED] express herself and gain a greater measure of internal security.
9. Mother should opt to enroll [REDACTED] in auxiliary forms of psychotherapy (i.e. art, music) in order to help foster self-expression.
10. [REDACTED] could benefit from a group therapy situation with peers who have similar family histories.
11. As with all adolescents, substance abuse education is mandatory.
12. Mother should opt to pursue an annual complete, annual, physical examination with blood work (diabetes, thyroid, Lyme, and any other testing at the discretion of the examining physician) to rule out any intercurrent medical problems.
13. [REDACTED] remains at risk for school refusal, which requires ongoing monitoring and intervention.
14. [REDACTED] should be subject to the same set of behavioral expectations both at school and at home in order to solidify any behavioral gains and avoid any confusion of [REDACTED]'s part.



Ellen M. Platt, D.O.

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22
West Morris Central High School
259 Bartley Road
Chester, NJ 07930

October 10, 2016

Mr. Cusack,

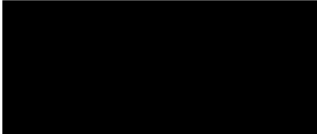
As you know, [REDACTED] is experiencing a difficult time right now due to crippling anxiety and depression. Until she gets regulated on the correct medication she cannot function in school. We are requesting a home tutor until she can get back on her feet. Thank you for being so supportive.

[REDACTED]

P.S. I will have the pediatrician send a medical note as well.




10/11/2016



Patient: 

DOB: 

To Whom It May Concern:

 is a patient of our office with ongoing depression and anxiety. Due to her current state of health, it would be best that she did not attend school and had home bound instruction.

Any further questions, please contact my office.

Sincerely,



Melissa M. Libert, D.O., FAAP

Cc:

Enc:

11/29/2017

West Morris Regional High School District Mail - Update on [REDACTED]



24

Joseph Cusack <jcusack@wmrhsd.org>

Update on [REDACTED]

3 messages

To: ebraun@wmrhsd.org, jcusack@wmrhsd.org

Sat, Oct 15, 2016 at 2:16 PM

Mr. Braun and Mr. Cusack,

[REDACTED] had an appointment yesterday (Friday the 14th) with a specialist. It was determined that she should enter the outpatient facility in Parsippany (ICPC) where she will attend therapy five days a week for two to four weeks. If you are not familiar with the program it runs from 9 to 2:30 and then the students have tutoring from 2:30 to 4:30. They will be sending an official letter to you shortly and will request work from WMC teachers. Therefore, we will not need the tutoring from West Morris. Two instructors have contacted me by phone and email. (French and Chemistry) I can reply to the Chemistry teacher but the French teacher did not leave an email and I didn't catch her phone number. Can you please notify any other tutors that [REDACTED] will not be requiring their services. I'm sorry for the inconvenience with the short notice but this all came about yesterday. I'm praying that this will be the best solution for [REDACTED]. She will be in a structured environment every day and I think that will be very beneficial.

Please let me know that you have read this email. Thank you for all your care and concern.

Joseph Cusack <jcusack@wmrhsd.org>

To: [REDACTED]

Fri, Dec 9, 2016 at 9:00 AM

Hello Mrs. [REDACTED] - I saw that Mr. [REDACTED] left a voicemail this morning - I am out of the building today at a workshop at Montclair State. I will reach out to you when I'm back in the office on Monday, but if this is an issue that needs immediate attention, please call Anne Meagher at 908-879-5212 ex 3320 or Ed Braun at 3325.

[Quoted text hidden]

To: Joseph Cusack <jcusack@wmrhsd.org>

Fri, Dec 9, 2016 at 12:41 PM

Thank you. We will be in touch Monday.

Sent from my Verizon, Samsung Galaxy smartphone

[Quoted text hidden]

CONFIDENTIALITY NOTICE: This message is from the West Morris Regional High School District. This message and any attachments may be confidential and/or privileged and are intended only for the individual(s) or group(s) identified as the addressee. If the message addressee is in error, or you are not authorized to read, copy, or distribute this message or attachments; please delete this message and attachments and notify the sender by return email at the address listed above.

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West Morris High School
Joe Cusack

1/4/2017

Dear Mr. Cusack,

Our daughter [REDACTED] has been diagnosed with depression and severe anxiety. We would like to request a CST evaluation and IEP for her. We would also like to request home instruction. Thank you for your help in this matter.

Sincerely,



11/26/2017

West Morris Regional High School District Mail - [REDACTED]

26



Joseph Cusack <jcusack@wmrbsd.org>

[REDACTED]
3 messagesReply-to: [REDACTED]
To: jcusack@wmrbsd.org
Cc: kdickerson@wmrbsd.org

Fri, Sep 8, 2017 at 2:58 PM

Hi Joe,

In the phone conversation I had with you and Kendra back on August 25th, you indicated that [REDACTED] would be coming back to West Morris as a General Education student with a 504. We were confused at the time since she was already determined to be eligible for special services with a previously proposed IEP. Since then I have spoken to Kendra and she indicated that the team is waiting for results from Dr. Platt's office to schedule a new IEP. Can you please supply us with the proposed plan for [REDACTED] in writing? Thank you.

Regards,

Joseph Cusack <jcusack@wmrbsd.org>

To: [REDACTED]

Mon, Sep 11, 2017 at 2:24 PM

Hello Mr. and Mrs. [REDACTED] - I am not sure if you are referring to the proposed IEP or the 504 plan. If you need a copy of any IEP proposal, Kendra would have that documentation. I have attached a copy of the 504 plan that we developed last December when [REDACTED] was returning to school. This plan would still be in effect for the 2017-18 school year here at WMC.

Also, I have contacted educere and asked them to re-start [REDACTED]'s Driver Education class. You and [REDACTED] should be receiving notification in the next day or so indicating when she can log back in to complete the course. I believe the new end date will be November 17th - I will confirm that date and get back to you.

Regards,
Joe Cusack
[Quoted text hidden]

[REDACTED] - 504.docx.pdf
130K

To: Joseph Cusack <jcusack@wmrbsd.org>

Mon, Sep 11, 2017 at 8:11 PM

Hi Joe
Thank you for the information.
Regards
[REDACTED]

Sent from my Verizon, Samsung Galaxy smartphone

[Quoted text hidden]

CONFIDENTIALITY NOTICE: This message is from the West Morris Regional High School District. This message and any attachments may be confidential and/or privileged and are intended only for the individual(s) or group(s) identified as the addressee. If the message addressee is in error, or you are not authorized to read, copy, or distribute this message or attachments; please delete this message and attachments and notify the sender by return email at the address listed above.

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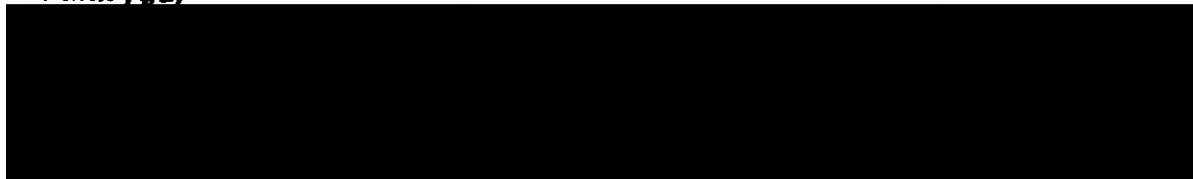
Mr. Stephen Ryan, Principal
cc: Mr. Joseph Cusack
cc: Mrs. Kendra Dickerson
West Morris Central High School
259 Bartley Road
Chester, NJ 07853 07930

Mr. Ryan,

Please consider this letter as official notice that we are withdrawing [REDACTED]
Humcke from West Morris Central High School, effective immediately. [REDACTED] is
now enrolled at the Purnell School in Pottersville. Please send her official
transcripts to:

Purnell School
51 Pottersville Road
P.O. Box 500
Pottersville, NJ 07979
Attention: Kate Davis - Associate Director of Admissions

Thank you,



RECEIVED
9/25/2017 3:0



P.O. Box 500, 51 Pottersville Road
ENROLLMENT CONTRACT 2017-2018

Pottersville, NJ 07979
Day Boarding Student

STUDENT NAME: [REDACTED]

GRADE IN 17/18: 11

PLEASE ENTER STUDENT'S SOCIAL SECURITY #: [REDACTED]

In consideration of the acceptance of this Enrollment Contract by Purnell School for the academic year beginning in September 2017 and ending in June 2018, hereinafter referred to as the "academic year," I/we the undersigned agree to pay the combined annual fee of \$44,570* for a Day Boarding student. To confirm the enrollment of my /our daughter, a \$3,000 non-refundable tuition deposit must accompany this signed Enrollment Contract by September 1, 2017. Since the tuition deposit will be credited toward the combined annual fee, I/we elect to pay the balance of \$41,570 according to the following payment plan:

<input type="checkbox"/> Pay in Full to Purnell School The balance of the combined annual fee for the full academic year is paid in one installment due: <p style="text-align: center;">September 1, 2017- \$41,570</p> Tuition Refund Plan is optional if tuition is paid in full	<input checked="" type="checkbox"/> Pay with TMS Payment Plan The balance of the combined annual fee for the full academic year is paid in accordance to the TMS Payment Plan chosen by the family on the enclosed TMS form. Tuition Refund Plan is required.
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

*The Student Incidentals Account and student trips are additional expenses.

The Tuition Refund Plan is optional when Pay in Full is selected and required with all Other Payment Plans. A description of the Plan is enclosed with this contract. I/we agree that the proceeds from any claims to which I/we would be entitled under the Tuition Refund Plan will first be applied to my/our account, paying any excess to me/us.

I/we agree to pay separately when billed the Student Incidentals Account charges. An additional deposit of \$1,500 for personal incidentals charges is required for each academic year or \$2,500 if participating in riding program. This charge for the Student Incidentals Account is included with the summer billing. At the end of each academic year, the Student Incidentals Account will be reconciled, with any remaining funds being refunded to the payer or carried over for continuing students. In addition, I/we understand that student trips will be a separate charge which I/we agree to pay.

I/we understand that the agreement to pay the combined annual fee for the full academic year and all charges incurred is a fixed and non-cancelable obligation. The fact that the combined annual fee may be paid in installments does not constitute a part-year contract. I/we understand that failure to meet the financial commitment to the School will result in consequences, including late fees being assessed and grade reports/transcripts being held. Early Payment Plan: Late fees of \$200 will be assessed by Purnell School on tuition payments received after October 10. TMS Installment Plan I: Late fees of \$200 will be assessed by Purnell School on tuition payments received after October 10 and December 10. TMS Installment Plans II & III: Late fees of \$25 per month will be assessed by TMS on past due payments. There is a non-refundable application fee of \$65 for participating in these options. The fee is payable to TMS and will be billed separately. Further, students will not be allowed to enroll in September, or return/enroll in January unless all their accounts, including but not limited to Tuition and Student Incidentals Account, are current. Purnell has the right to terminate this contract if the student is not in good standing in the current academic 2017-2018 school year.

I/we agree to pay all costs, including all accumulated interest and penalties and all attorneys' fees and expenses incurred by Purnell in any collection efforts if either of the following events occurs: (a) if any amount due under this Enrollment Contract is not received on its due date; or (b) if any bankruptcy or insolvency proceeding relating to the Parent or Guardian (whether voluntary or involuntary) is begun.

It is further agreed that enrollment, as specified within this contract, may be withdrawn in writing prior to September 1, 2017, without penalty (except for the tuition deposit which is nonrefundable). After September 1, 2017, if the student is withdrawn or dismissed, the undersigned parents or guardians are obligated to pay the combined annual fee for the full academic year and any other charges incurred to that point, plus, where necessary, all costs of collection, including, but not limited to, reasonable attorneys' fees. No portion of the Tuition paid or outstanding for the School Year will be refunded, cancelled or forgiven in the event of the Student's absence, withdrawal, or dismissal from the School for any reason after September 1, 2017.

As parents or guardians and as a student, we agree to accept and abide by the rules, regulations and guidelines of Purnell School as stated in the Purnell School Student Guide. We understand and agree that the School reserves the right to act, in its sole discretion, upon matters of conduct, morals and ethics, which includes the right to suspend or dismiss in any instance in which the behavior of a

It is agreed that Purnell School may, in its sole discretion, and without regard to whether or not the student has abided by the rules, regulations and guidelines of Purnell School as stated in the Purnell School Student and Parent Guide, decline to offer an enrollment contract in subsequent academic years.

Parents/Guardians signing this Enrollment Contract understand and agree that if there is any failure to make any individual payment in accordance with the schedule set forth in this Contract, the School, at its discretion, may refuse to allow the Student to attend classes, complete examinations or assignments or participate in School activities as may be scheduled. Parents/Guardians further understand and agree that, if there is a failure to make any payment in accordance with the schedule set forth in this Contract, the School may refuse to release the Student's transcripts or records to any person, entity, organization, or school (including, but not limited to, the Parents/Guardians and any other school at which the Student may be enrolled at any time) until all amounts owed the School by the Parents/Guardians have been paid in full and the Parents/Guardians' account with the School is current.

It is also understood and agreed between all parties that, upon written notice to the Parents/Guardians, the Purnell School may immediately cancel this Enrollment Contract at any time after any payment due under this Agreement becomes due and payable and is not paid by the Parents/Guardians. In the event of such a cancellation by the School, the Parents/Guardians shall remain fully and unconditionally responsible to pay to the School the full amount of Tuition owed under this Enrollment Contract for the full School Year.

Parents/Guardians agree to pay the School's attorney's fees and costs, in addition to all collection fees, in the event that the School must take action to collect the tuition amount or otherwise enforce this Agreement.

Parents/Guardians agree to release and hold harmless the Purnell School, its agents, representatives and employees from all claims, damages, or other liabilities for injuries to the Student which are not the result of gross negligence, intentional neglect, or willful or wanton conduct by the School or its agents, representatives or employees. Parents/Guardians further agree to indemnify and hold harmless the Purnell School for damages to School property, or personal injury or property damage suffered by another student, faculty member or other employee of the School, caused by the Student and resulting from conduct which falls to conform to the laws of the State of New Jersey, Federal Law, or the rules and regulations of the School, as set forth in the Purnell School Student Guide or otherwise. In addition, Parents/Guardians further agree to indemnify and hold harmless the Purnell School for willful, wanton, or negligent conduct by the student which causes personal injury or property damage to any other person.

The Purnell School reserves the right to use photographs of the Student in School and approved publications, both written and electronic. Parents/Guardians may restrict this right by advising the School of the same in writing within thirty (30) days of the execution of the Enrollment Contract.

This Agreement shall not be changed, modified, amended or terminated, nor may any of its provisions be waived, unless done so by a written, fully executed agreement between the parties.

By signing this contract, you indicate that you are aware that any false statements or failure to disclose information in the application or interview process may be sufficient to result in the student's dismissal from the School. The terms and provisions of this contract are governed by the laws of the State of New Jersey.

Date: 8-20-17

Signed: _____

Parent SS# _____

Date: 8-30-17

Signed: _____

Parent SS# _____

Parents Email: _____

Date: 8-30-17

Signed: _____

Accepted: Purnell School By: _____

Date: 8/31/17

Please print parent/guardian name(s) and address(es) as you wish them to appear on all school mailings (including financial statements).

Name(s): _____

Phone(s): _____

Address(es): _____

Name(s): _____

Phone(s): _____

Address(es): _____

**TUITION MANAGEMENT SYSTEMS**

Helping Families Afford Education®

MANAGE MY ACCOUNT

LINK MY ACCOUNTS

Log-Out

Welcome, [REDACTED]

Thursday, October 12, 2017 6:02 PM

Account Overview	Billing & Payments	Adjust Budget / View Costs	Re-Enroll	Personal Information	Leaving School?	Communication Preferences	Help Center
[REDACTED] ACC# [REDACTED]							

Confirmation

Thank you for choosing TMS. Please print this page for your records.

Payment Information:

Date: 10/12/2017
 Payer Name: [REDACTED]
 TMS Account Number: [REDACTED]
 Confirmation Number: 257924038
 Amount: \$7,482.99
 Total Amount: \$7,482.99
 Routing Number: [REDACTED]
 Account Number: [REDACTED]

Your transaction has been processed and posted to your account. This payment could appear on your bank statement as follows:

- Purnell School - TMSMPP - \$7,482.99

You will pay a fee for all returned payments along with any fees that your school may assess.

You will receive an email notification on how to view and acknowledge your TIL for this payment plan.

MY ACCOUNT HOME

MAKE ANOTHER PAYMENT

Call 800-722-4867
 Outside U.S. and Canada
 Call 401-921-3999
 Need Help? Call Us:
 8 AM - 10 PM M-F (ET)
[Help Center](#)

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- [Privacy Statement](#)
- [Careers](#)



PTM21MAFWWW

PNC Online Banking

Date	Description	Amount	Account
08/01/2017	Check 5811	\$18,345.00	[REDACTED]

This is an image of a check, substitute check, or deposit ticket. Refer to your posted transactions to verify the status of the item. For more information about image delivery click here or to speak with a representative call: 1-888-PNC-BANK (1-888-762-2266) Monday - Friday: 7 a.m. - 10 p.m. ET, Saturday & Sunday: 8 a.m. - 5 p.m. ET.

[REDACTED]		5811
[REDACTED]		11/26/2017
Date <u>Aug 31, 2017</u>		
Pay to the Order of <u>Purnell School</u>	\$ <u>18,345.00</u>	
<u>Eighteen thousand three hundred forty five and 00/100</u> Dollars		
PNC BANK		
PNC Bank, N.A. (00)		
For <u>Aug & Sept payments</u>	[REDACTED]	
[REDACTED]	5811	

[REDACTED]	08-31-2017	0523
GLADSTONE NJ		
P-G BANK		
	FOR DEPOSIT ONLY	
	PURNELL SCHOOL	

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TUITION MANAGEMENT SYSTEMS

Helping Families Afford Education

PURCHASE IN PROGRESS

LINK MY ACCOUNTS

RETURN TO HOME

Welcome, [REDACTED]

Tuesday, February 20, 2018 2:05 PM

[Billing & Payments](#)[Adjust Budget / View Costs](#)[Personal Information](#)[Leaving School?](#)[Communication Preferences](#)[Help Center](#)

MY STATEMENT

What is a TEL?

Account Information

Today's Date: 2/20/2018

Account #:

SSN:

Student Name:

Payer Name:

Payer Address:

Payer Address 2:

City, State, Zip:

Country:

School:

Purnell School

Status/Sub Status:

Active/Pd Full

Enrollment Date:

8/31/2017

Plan Name:

SCH USE ONLY - 6 Payments - Flex Plan - OCEF Only

Budget Amount:

\$44,570.00

Term 1:

\$44,570.00

Payment Method:

Bill

Payer Billing Method:

eBill

Paid To Date:

\$44,570.00

Total Balance:

\$0.00

Past Due:

\$0.00

Payment Schedule

Payment Number	Term	Payment Due Date	Amount Due	Amount Paid
1	1	8/1/2017	\$7,428.33	\$7,428.33
2	1	9/1/2017	\$7,428.33	\$7,428.33
3	1	10/1/2017	\$7,428.33	\$7,428.33
4	1	11/1/2017	\$7,428.33	\$7,428.33
5	1	12/1/2017	\$7,428.33	\$7,428.33
6	1	1/1/2018	\$7,428.35	\$7,428.35

Account Transactions

Date	Transaction	Budget Activity	Other Activity	Balance
8/31/2017	Standard MPO, Beginning Balance	\$44,570.00		\$44,570.00
8/31/2017	Standard MPO, Paid At School	(\$14,857.00)		\$29,713.00
8/31/2017	Enrollment Fees, Charge		\$55.00	\$29,768.00
10/6/2017	Service Charges, Charge		\$25.00	\$29,793.00
10/12/2017	Standard MPO, Payment	(\$7,402.99)		\$22,390.01
10/12/2017	Enrollment Fees, Payment		(\$55.00)	\$22,335.01
10/12/2017	Service Charges, Payment		(\$25.00)	\$22,310.01

10/30/2017	Standard MPO, Payment	(\$7,453.33)	\$14,856.68
12/1/2017	Standard MPO, Payment	(\$7,428.33)	\$7,428.35
12/30/2017	Standard MPO, Payment	(\$7,428.35)	\$0.00

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Call 401-921-3999
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Help Center

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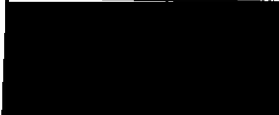


PTM61MAFWWW

PURNELL SCHOOL

P O Box 500
 Pottersville, NJ 07979
 908-439-4013

Incidental Stmt

BILL TO:


DATE
11/9/2017

			AMOUNT ENC.
DATE	TRANSACTION	AMOUNT	BALANCE
08/31/2017	Balance forward		
09/18/2017	GENJRNL #dd. dorm damage deposit	250.00	-1,500.00
10/04/2017	GENJRNL #dd. class books	102.00	-1,250.00
			-1,148.00
			Charges to account
			-\$1,148.00

Please remit \$ 352.00 to replenish the account to the required level.
 The balance in the incidental account should be replenished to a credit balance (negative balance) of \$ 1,500.00

Pd CR# 5868
352.00
11/20/17

ELLEN M. PLATT, D.O.

CURRICULUM VITAE

EDUCATION

PHILADELPHIA COLLEGE OF OSTEOPATHIC MEDICINE, Philadelphia, PA D.O. June 1973
TEMPLE UNIVERSITY, Philadelphia, PA B.A. January 1969

POST DOCTORAL TRAINING

THE JEWISH BOARD OF GUARDIANS MADELINE BORG CHILD GUIDANCE INSTITUTE,
New York, NY January 1, 1978 – June 30, 1979

- *Child Psychiatry Fellowship*: Training and experience in all aspects of child and adolescent psychiatry, including administrative psychiatry; therapeutic nursery setting; residential treatment of adolescents with psychiatric disorders, learning disabilities, and neurological impairments; psychopharmacology; and outpatient psychotherapy with individuals, groups, and families; under the direction of Aaron Esman, M.D.

THE ROOSEVELT HOSPITAL, New York, NY July 1, 1977 – December 31, 1977

- *Child Psychiatry Fellowship*: Training emphasized outpatient psychotherapy, psychopharmacology, and consultation-liaison work; under the direction of Bernard Pacella, M.D.

THE ROOSEVELT HOSPITAL, New York, NY July 1, 1974 - June 30, 1977

- *Residency, psychiatry*: In addition to resident responsibilities, also intermittently covered Ward Administrators' responsibilities and for the Chief of Community Psychiatry; under the direction of Harley Shands, M.D., Stephen E. Katz, M.D., and John M. Oldham, M.D.

SAINT MICHAEL'S MEDICAL CENTER, Newark, NJ July 1, 1973 - June 30, 1974

- *Internship, rotating*: under the direction of Leon G. Smith, M.D.

LICENSURE

New York, November 4, 1974
New Jersey, August 3, 1974
Pennsylvania, July 12, 1974

BOARD CERTIFICATION

American Board of Psychiatry and Neurology	April 1979
American Osteopathic Board of Neurology and Psychiatry	April 1980
American Board of Adolescent Psychiatry	May 1995
Recertified	
American Board of Forensic Examiners (not by examination)	January 2016
American Osteopathic Board of Neurology and Psychiatry, Certification in Child and Adolescent Psychiatry	February 1997
American Board of Psychiatry and Neurology, Certification in Child and Adolescent Psychiatry	August 1995
	Sept. 1995-Sept. 2005

PROFESSIONAL ASSOCIATIONS

New Jersey Association of Osteopathic Physicians and Surgeons	1974 – present
American Osteopathic Association	1971 – present
American Psychiatric Association	1976 – 1991
New York County District Branch of American Psychiatric Association	1976 – 1991
Fellow, American Society for Adolescent Psychiatry	2015 – present

PSYCHIATRIC EXPERIENCE

PRIVATE PRACTICE PSYCHIATRY, Cedar Grove, NJ

July 1977 – present

- *Principal, Platt Psychiatric Services, L. L. C.*
- *Psychotherapy and psychiatric treatment* of children, adolescents, and adults in individual, group and family settings
- *In-depth and second opinion Child Study Team Evaluations* and follow-up with school systems
- *"Fit for Duty" evaluations* for school districts and corporations
- *Psychiatric consultation and risk assessment for multiple public school districts*
- *Supervision* of other mental health professionals in agency and private practice settings, including professional counselor candidates seeking their NBCC and licensure
- *Evaluation* of child abuse and child custody cases; competency hearings
- *Expert testimony* in education due process hearings and mediations; matrimonial and child custody litigations and mediations; personal injury litigation; and termination of parental rights and guardianship proceedings
- Special interest in school refusal, trauma, and pervasive developmental disorders

COORDINATED TREATMENT SOLUTIONS, L.L.C., Cedar Grove, NJ

September 2009 – present

- *Founder and Principal*
- *Psychiatric consultations, risk assessments, crisis interventions, classroom observations, and psychotherapy* to enrich and maximize the therapeutic experience of referred students with behavioral disabilities Grades Pre-K through 12
- *Coordination and consultation* with Child Study Team, Department of Special Services staff, and third-party providers
- *Supervision* of therapeutic counseling of referred students
- *Supervision of school staff* regarding referred students
- *Staff training, workshops, and program development*
- *Consultant to Mt. Carmel Gullid pre-school and elementary school autism program, 2009-10*
- *Psychotherapy Consultant to Bridges Academy, Bloomfield Public Schools, 2010-13*
- *Psychotherapy Consultant to MAP elementary school program, Montclair Public Schools, 2010-13*

AMERICAN DAY TREATMENT CENTERS-NORTHEAST REGION April 1995 - November 1996

- *Northeast Regional Medical Director:* responsible for the psychiatric management of 6 centers and for the supervision, training, peer review and monitoring of about 20 psychiatrists as well as overseeing medical regulations, referral development, Joint Commission audit, and coordination of psychiatry with other departments including utilization review (Position changed as a result of financial reorganization within the company)

AMERICAN DAY TREATMENT CENTERS-VERONA CENTER, Verona, NJ

Dec. 1994 - June 1997

- *Medical Director and Adolescent Psychiatrist*

**RESIDENTIAL AND INSTITUTIONAL PREVENTION PROGRAM OF THE DIVISION OF
YOUTH & FAMILY SERVICES IN SUSSEX COUNTY, Sussex County, NJ** March 1990-June 1999

- *Consulting Psychiatrist*
- *Supervision of professional social work staff (LCSW, MSW), counselors, and therapists*

CALDWELL COLLEGE, Caldwell, NJ

Jan. 1989-June 2001

- *Consulting Psychiatrist*

MIDS (MISCARRIAGE, INFANT DEATH, AND STILLBIRTH) SELF-HELP GROUP

September 1983-2010

- *Consultant*
- *Advisory Board Member*

WAYNE COUNSELING CENTER, Wayne, NJ

July 1981 - June 1991

- *Consulting Child and Adolescent Psychiatrist*

HOSPITAL APPOINTMENTS

ST. LUKE'S ROOSEVELT MEDICAL CENTER, New York, NY

February 1978 - June 1986

- *Assistant Attending, Psychiatry*

ACADEMIC APPOINTMENTS AND TEACHING EXPERIENCE

TOURO COLLEGE OF OSTEOPATHIC MEDICINE, New York, NY November 2014 – present

- *Adjunct Faculty, Lecturer in Behavioral Medicine and Human Behavior*
- *Human Development* March 30, 2016
Three-hour presentation regarding human psychiatric development milestones
- *Perception vs. Reality in Psychiatric Disorders* November 14, 2014
Three-hour presentation regarding possible and sometimes unexpected psychiatric disorders and diagnoses.

PHILADELPHIA COLLEGE OF OSTEOPATHIC MEDICINE, Philadelphia, PA

- *Clinical Assistant Professor, Department of Physician Assistant Studies Volunteer* March 2006 – present
July 1, 2016 – June 30, 2019
- *Preceptor for Physician's Assistant Students* March 2006 - present
Behavioral Health Rotation
- *Psychopharmacology for Children and Adolescents* February 8, 2010
Doctoral Program in School Psychology Committee
Three-hour presentation regarding medications for ADHD, Depression, Anxiety, Bipolar Disorder, and other psychiatric diagnoses in children and adolescents
- *Doctoral Program in School Psychology Committee, Third Member* 2007-2009
Supervising Psy.D. Thesis regarding School Psychologist's Knowledge of Tourette's Syndrome

- **Department of Psychology**
"The Tornado of School Refusal" May 18, 2007
Three-hour presentation regarding the dynamics, diagnostic scope and suggested interventions for School Refusal

- **Overview and Differential Diagnosis of Psychiatric Disorders in Children and Adolescents**
Advanced Graduate Seminar in School Psychology Feb. 6 and Oct. 23, 2006
Three-hour lecture/seminar including a brief diagnostic synopsis of the most frequently seen clinical presentations highlighted with clinical conundrums and case presentations

CALDWELL UNIVERSITY, Caldwell, NJ

- **Adjunct Faculty, Department of Applied Behavior Analysis** Sept. 2010 – Dec. 2012
- **Behavioral Pharmacology**
ABA Graduate School Program May – June 2012
August – December 2012
Semester-long course regarding psychotropic medications used to treat individuals with developmental disabilities and/or psychiatric disorders.

COLUMBIA UNIVERSITY COLLEGE OF PHYSICIANS AND SURGEONS, New York, NY
July 1982 - June 1986

- **Instructor in Clinical Psychiatry**

THE ROOSEVELT HOSPITAL, New York, NY

- **Psychiatric Consultant to Primary Care Residency Program**
Teaching via case conferences and patient interviews Sept. - Dec. 1977;
Sept. 1979- May 1980
- **Alcoholism for the General Practitioner**
Lecture presentation to the Post-Graduate Institute for Osteopathic Medicine and Surgery in New York, NY September 24, 1977
- **Psychopharmacology for the Primary Care Resident**
Lecture presentations to Primary Care Residents November 1976
- **Psychiatric Aspects of Medical Illness**
Lecture and seminar series for third-year medical students on rotation from Columbia University College of Physicians and Surgeons October - November 1976

OTHER LECTURES AND SEMINARS

1981 – present

Transitions for Children and Adolescents

- Two- to three hour presentation the transitions that children and adolescent face going from elementary school to middle school to high school to post secondary education to employment and adulthood
 - Area school mental health professionals and educators, given at the Lakeview Learning Center on March 20, 2015

Perception v. Reality: Psychiatric Disorders Come to School

- Two- to three hour presentation regarding the possible and sometimes unexpected psychiatric disorders and diagnoses that may underlie students' school behavior
 - Area school mental health professionals and educators, given at the Lakeview Learning Center on November 14, 2014

- o New Jersey Council of Administrators of Special Education Third Annual Fall Conference on October 17, 2014

Diagnostic Awareness

- One- to two-hour presentation involving the diagnostic considerations of behavioral problems and how they are manifested in school
 - o School mental health professionals and educators of the Montclair, N.J., Public Schools on April 24, 2013
 - o School mental health professionals and educators of the Bloomfield, N.J., Public Schools on March 5, 2013

Bullying

- Two-hour presentation including definition and nature of bullying, the various forms of bullying, cyberbullying, bullying statistics, the characteristics of victims and bullies, prevention, school interventions, and teacher strategies
 - o School mental health professionals and educators of the Bloomfield, N.J., Public Schools on November 2, 2010

Mood Disorders Come to School

- Three-hour presentation including an overview of the diagnoses, causes, and symptoms of, as well as the treatment and counseling/therapeutic services for, Bipolar Disorders, Depression, Affective Disorders, Mood Disorders, and Post-Traumatic Stress Disorders in school age children. Teachers, practicing psychologists, social workers, and other mental health professionals are eligible for continuing education credits after completing this seminar
 - o School mental health professionals and educators of the Bloomfield, N.J., Public Schools on November 2, 2010
 - o Essex County, N.J., school mental health professionals and educators at the NEHN Therapeutic School, Belleville, N.J., on May 7, 2010.
 - o School mental health professionals, educators, and parents at the Harrison School, West Caldwell, N.J., on January 18, 2010.

Positive Behavioral Supports for Inclusion Classes

January 25 and March 19, 2010

- Two- and three-hour presentations to school mental health professionals and educators of the Hillside, N.J., Public Schools regarding the classification, diagnostic considerations, and classroom implications of Behavioral Disorders and the development and implementation of protocols and procedures for behavioral infractions in the school setting. Teachers, practicing psychologists, social workers, and other mental health professionals are eligible for continuing education credits after completing this seminar.

Thrive with ADHD: The School's Guide to ADD/ADHD

October 12, 2009

- Three hour presentation to mental health professionals, educators, and parents of the Summit, N.J., Public Schools regarding ADD/ADHD, including diagnosis, common medication treatments, associated conditions, behavioral manifestations in the school and home settings, and intervention strategies for parents and teachers. Teachers, practicing psychologists, social workers, and other mental health professionals are eligible for continuing education credits after completing this seminar.

Suicide Prevention

October 12, 2007

- Three-hour presentation to mental health professionals and educators at Mt. Carmel Guild School, West Orange, N.J., including an overview of suicide, myths/facts, statistics, associated diagnoses, warning signs, case studies, prevention strategies, appropriate responses, postvention, and resources. Teachers, practicing psychologists, social workers, and other mental health professionals are eligible for continuing education credits after completing this seminar.

Overview and Differential Diagnosis of Psychiatric Disorders in Children and Adolescents Oct. 20, 2006

- Three-hour presentation to mental health professionals, educators, and parents at Sage Day School, Boonton, N.J., including a brief diagnostic synopsis of the most frequently seen clinical presentations highlighted with clinical conundrums and case presentations. Teachers, graduate students, practicing psychologists and other mental health professionals are eligible for continuing education credits after completing this seminar.

The Tornado of School Refusal

- Two to three hour presentation regarding the dynamics, diagnostic scope and suggested interventions for School Refusal. Teachers, other school personnel, graduate students, practicing psychologists and other mental health professionals including but not limited to NBCC counselors and LSW's are eligible for continuing education credits after completing this seminar: 2003, 2004, 2005.
 - Bloomfield Public Schools Child Study Team, Administrative and Guidance Staff on November 4, 2008
 - Benway School in Wayne, NJ presentation on School Refusal, Depression, and Suicide in Adolescents on November 19, 2008
 - Sage Day School, Somerset, N.J. Multi-county personnel presentation on Oct. 13, 2004
 - Keansburg, N.J. Public School personnel for an in-service presentation on Feb. 9, 2004
 - Kittatinny, N.J. Public School personnel for an in-service presentation on Dec. 8, 2003
 - Sussex-Warren Association of School Psychologists and Social Workers at Sussex County Community College on December 6, 2003
 - Long Branch, N.J. Pupil Personnel Services for an in-service presentation on November 17, 2003
 - Essex County Education Association for an Association Meeting in January 2003
 - Bergenfield, N.J. Child Study Team, Administrative, and Guidance Staff at Bergenfield High School on May 24, 2001
 - Essex County Child Study Team and Guidance Staff at the West Essex Regional High School in North Caldwell, NJ on October 21, 1998
 - Passaic County school personnel at the Wayne Counseling in Wayne, NJ on December 3, 1997
 - The Wayne, N.J. Public School Teaching Staff at its in-service in Wayne, NJ on October 20, 1997
 - The Sussex County School Social Workers Association at its Annual Meeting in Sparta, NJ on January 15, 1997
 - The New Jersey Association of School Psychologists at its Annual Meeting in Cranbury, NJ on May 10, 1996

The Emotional Impact On Parents and Families Of Special Needs and Classified Children May 2005

- Presentation to parents of special needs children in the Butler, N.J., school district

Grief in Children and Adolescents

January 2003

- Three hour presentation to Essex County, N.J., Education Association at its Annual Meeting in Newark, NJ regarding the appearance, dynamics, diagnostic scope and suggested interventions for children and adolescents who are in the midst of a grieving process that may not always be apparent as a primary indicator. Teachers and other school personnel are eligible for continuing education credits after completing this seminar.

ADHD on the Home Front

February 2003

- Unpublished paper presented to the Cedar Grove, N.J. Parents Special Education Focus Group

The School's Guide to ADHD

- Four to six hour presentations at multiple sites to school personnel regarding all aspects of understanding ADHD in the classroom. Teachers and other school personnel are eligible for continuing education credits after completing this seminar.

- o "School's Guide to ADD and ADHD: Classroom Strategies and Parenting Techniques" presentation to the Pompton Lakes, N.J.. school district personnel. September 7, 2004.
- o "School's Guide to ADHD" presentation to teachers, Child Study Team staff and school administrators enrolled at Sussex County College. October 20, 2002.

Dealing With Trauma

- Unpublished paper presented with Platt Psychiatric Associates Post Traumatic Stress Debriefing Team on multiple occasions to several public school settings, members of the teaching, guidance, administrative, and Child Study Team departments. Presentation was requested in response to the World Trade Center tragedy. Fall 2001

Stress, Depression, and Eating Disorders in Adolescents

- Unpublished paper and lecture presentation to Montclair-Kimberly Academy high school students, parents and staff September 28, 2000

The High-Risk Adolescent

- Unpublished paper presented to Essex County School Personnel September 1995

Perspectives on the High-Risk Student

- Unpublished paper presented at American Day Treatment Centers, Verona Center November 1995

ADHD in Adolescents

- Unpublished paper presented at American Day Treatment Centers, Grand Opening Ceremony:
 - o Cherry Hill Center, November 1995
 - o Verona Center, April 1995

How to Restore and Repair the Damage From Society After the Loss of a Child

- Unpublished paper presented to "MIDS" (Miscarriage, Infant Death, Stillbirth) Support Group November 10, 1990

Dealing with Feelings of Guilt, Failure and Shame as a Parent of a Handicapped Child

- Unpublished paper presented to Center for Special Education of the Jewish Education Association of Metrowest, Fairfield, NJ Sept. 30, 1990

Careful Not Fearful

- Interview presented to Celeste Goombs for use in her article on anxiety for "Sesame Street Magazine," Fall, 1990 edition May 15, 1990

Social Issues in Childhood and Adolescence: Cliques and Bullies

- Interview and conference presented to Nancy Rubin for use in her article for "Parents Magazine," November 1989 edition February 3, 1988

"You're Not My Mommy!"

- Unpublished paper presented to students at The Sheffield School for Nannies and Governesses in Hopewell, NJ April 20, 1988

Second Generation Children of Alcoholics: Similarities in Four Clinical Presentations

- Unpublished paper November 1987

Aspects of Separation-Individuation in Child Development From Birth Through Adolescence

- Unpublished paper presented to students at The Sheffield School for Nannies and Governesses in Hopewell, NJ February 19, 1987

Separation-Individuation Process Followed in a Long-Term Insight-Oriented Psychotherapy Case

- Unpublished paper September 1986
- Depression, How to Get Up When You're Down, Coping with Stress and Depression* February 14, 1986
 - Workshop presentation at William Paterson College Center for Continuing Education on Youth Day for freshman, sophomore, and junior students from area high schools
- Discipline* January 31, 1986
 - Workshop presentation to Montclair Public Schools Home and School Association
- Psychological Effects on Flood Victims and Their Families* May 22, 1984
 - Unpublished paper and lecture presentation to staff and patients at the Wayne Counseling Center, Wayne, NJ, after a major flood occurred in the area
- Emotional Aspects of the Postpartum Period* March 3, 1983
 - Unpublished paper and presentation at WPAT Radio Station, Clifton, NJ, for the March of Dimes Healthy Baby Month
- Surrogate Mothers and Conflicts About Parenting* November 16, 1982 and February 26, 1983
 - Interview and conference presented to Nancy Rubin for use in her book *The Mother Mirror*, J. Putnam, New York, NY, 1984.
- The Working Mother* June 30, 1982
 - Panel discussion participation on *Midday Live Show*, WNEW TV, New York, NY
- The Birth of New Emotions* May 19, 1982
 - Unpublished paper and lecture presentation for the Essex/Union Chapter of the March of Dimes presented at the *New and Prospective Parents Seminar*
- Burnout* April 2, 1982
 - Unpublished paper and lecture presentation to New Jersey Institute of Technology Alumni Association, Newark, NJ.
- Stress, Depression, and Suicide in College Students* April 1981
 - Unpublished paper and lecture presentation to Advanced Psychology Seminar at Caldwell College, Caldwell, NJ.
- Stress, Depression, and Suicide in Adolescents*
 - Unpublished paper and lecture presentation to West Essex Regional High School students, parents and staff on March 21, 1981
 - Unpublished paper and lecture presentation to Montclair-Kimberly Academy high school students and staff on December 16, 2003, and November 2, 2006
- Psychological Aspects of Pregnancy and Postpartum Issues* 1981 - October 1983
 - Unpublished paper and serial lecture presentation to Maternity Fitness Program, Montclair, NJ.

RESEARCH INTERESTS

- School Refusal 1995-present
- Behavior Disorders and Possible Pregnancy-Related Factors 2005-present
- Environmental Risk Factors for Autistic Disorders and Nonverbal Learning Disability 2006-present

- Participated in a pilot study at the Roosevelt Hospital researching the Effectiveness of Biofeedback as a Treatment Modality for Children with Hyperkinetic Syndrome; under the direction of Mel Thrash, M.D. and Bernard Pacella, M.D.

Sept. 1976 - June 1977

OTHER SPECIAL INTERESTS

- Schizophrenia/Bi-Polar Disorder diagnostic overlap
- Physiological and emotional reaction to trauma
- Selective mutism
- Violence in society
- During residency training and Child Psychiatry Fellowship at Roosevelt Hospital, reviewed literature and worked with latency-age and adolescent children of alcoholics
- Suicide Prevention
- Classroom placement choices for special education students
- Traumatic brain injury

Curriculum Vitae

Natalie (Rallis) Schuberth, Psy.D., BCBA-D707 Alexander Road, Building 2, Suite 202
Princeton, NJ 08540

(609) 419-0400

schuberth@araprincedon.com

Profile

Natalie Schuberth, Psy.D, BCBA-D earned her Doctorate degree in Clinical Psychology from Loyola University Maryland. Dr. Schuberth conducts psychoeducational and psychodiagnostic assessments. She also provides individual therapy to children, adolescents, and adults, as well as parent training. In addition to working with individuals with a variety of presenting problems (i.e., anxiety, depression, OCD, ADHD), Dr. Schuberth has more than 15 years of experience working with individuals with Autism Spectrum Disorder (ASD) and their families in private practice, hospital, school, home, and community settings. She works primarily from a Cognitive Behavioral Therapy (CBT) orientation (including Exposure and Response Prevention (ERP) for anxiety/OCD) and integrates mindfulness into her work. Dr. Schuberth implements a customized, empirically validated treatment approach that addresses the whole person (e.g., psychological, academic, adaptive living, physical, spiritual) as well as the family and larger community systems. She also speaks at conferences, schools, and support organizations. Dr. Schuberth also serves as the executive director for Ability Tree New Jersey, a 501(c)3 organization reaching out to families with special needs through recreation, education, support, and training (REST).

Certifications

12/28/2015-Present	NJ Licensed Psychologist (35S100556300)
10/2013-Present	Board Certified Behavior Analyst-Doctoral (BCBA-D), Certificant 1-10-7300
9/2010-9/2013	Board Certified Behavior Analyst (BCBA), Certificant 1-10-7300
3/2008-9/2010	Board Certified Assistant Behavior Analyst (BCaBA), Certificant 0-08-2483

Education

01/2010-09/2013	Psy.D., Clinical Psychology Loyola University Maryland, Baltimore, MD
08/2008-12/2009	M.S., Clinical Psychology Loyola University Maryland, Baltimore, MD
09/2006-08/2007	Certificate in Applied Behavior Analysis (ABA) for Special Education Pennsylvania State University, Online
08/2002-05/2006	B.S., Neuroscience and Behavioral Biology; Psychology (double major) Emory University, Atlanta, GA

Professional Experience

09/2013-Present

Psychologist

Alexander Road Associates, Princeton, NJ

- Provide individual, group, and family therapy to children, adolescents, and adults
- Provide psychoeducational testing to individuals of all ages
- Autism diagnostic assessment
- Consult with colleagues and other professionals on cases

06/2012-12/2013

BCBA Supervisor

New Horizons in Autism, Neptune, NJ

Supervisor: Jessica Asen Mulhern

- Provide live and traditional supervision and training to non-ABA-certified bachelor's level professionals as they implement behavioral techniques with children with ASD and other neurodevelopmental disorders in 1:1 settings, private homes, schools, and integrated community environments
- Conduct functional behavior assessments (FBAs), create individualized behavior intervention plans (BIPs), monitor and evaluate the client's progress via observation, data collection, and graphing, and present results to professionals, clients, and community members
- Consult with colleagues and other professionals on various cases
- Educate family and community members regarding individuals with diversity factors such as a disability, as well as the basics of ABA

09/2011-05/2012

Writing Consultant

Loyola University Maryland Writing Center, Baltimore, MD

Supervisor: Elizabeth Leik, M.S., MFA

- Tutored and consulted undergraduates, graduate students, and professors regarding their writing
- Trained in engaging with a tutee in a supportive and productive manner

06/2011-08/2011

Psychology Associate

Mt. Washington Pediatric Hospital, Baltimore, MD

Supervisor: Caitlin Joy, Psy.D.

- Provided individual psychotherapy to children and adolescents and their families as well as parent training in an outpatient mental health clinic as part of a pediatric hospital
- Administered psychoeducational test batteries to children and adolescents, including ABAS, BASC-2, BRIEF, BYI, CDI, Children's Sentence Completion Test, CTOPP, GADS, GARS, GORT-4, OWLS, RCMAS, TAT, VMI, WIAT III, WISC IV, WRAML-2, WRAVMA, and Clinical Interview

- Participated in weekly individual supervision of individual child and adolescent therapy and assessment

09/2010-05/2011

Psychometrist

Loyola Clinical Centers, Behavioral Health & Assessment Services, Baltimore, MD
Supervisor: Rachel Grover, Ph.D.

- Supervised first- and second- year Psy.D. students in administration of psychoeducational test batteries and assessment writing with children and adolescents at an urban community mental health clinic

08/2010-05/2012

Graduate Resident Coordinator (GRC)

Loyola University Maryland, Baltimore, MD
Supervisors: Lincois Anderson, MSW
Greg Simons, M.S.

- Provided individual and group supervision to Resident Assistants
- Completed on-call rotations for on-campus emergencies
- Assisted in conducting staff meetings
- Initiated projects to foster staff development and community development
- Conducted hearings with undergraduate students regarding policy violations
- Assisted with area operations and administration
- Received weekly individual and group supervision

06/2010-05/2011

Psychometrist

Johns Hopkins: Lyme Disease Research Foundation of Maryland, Lutherville, MD
Supervisors: John Aucott, MD
Alison Schwarzwald, MPH

- Administered and scored psychological assessment batteries given to adults as part of the Study of Lyme Immunology and Clinical Events (SLICE), a Johns Hopkins grant funded research project assessing potential long-lasting physiological and cognitive effects of Lyme disease. Tests administered include WRAT-R Word Reading, Digit Span, Stroop Color and Word List, SDMT Symbol Digit, Hopkins verbal learning test, trail making, and COWAT

01/2010-01/2011

Administrative Assistant

Little Red Car ABA Services, LLC, Baltimore, MD
Supervisor: Kirsty MacIver, M.S., BCBA

- Utilized QuickBooks to enter and manage employee timesheets and paychecks, client invoices, and company finances for a home-based behavioral therapy company
- Submitted invoices to insurance companies, government agencies, and clients

05/2009-01/2011

**Educational Interventions for Autism Spectrum Disorders (EIA)
Supervisor**

Little Red Car ABA Services, LLC, Baltimore, MD

Supervisor: Kirsty MacIver, M.S., BCBA

- Provided direct Applied Behavior Analysis (ABA) and consultation to children with ASD and other neurodevelopmental disorders and behavior problems in 1:1 settings, family therapy, schools, and integrated community environments
- Provided live and traditional supervision and training to non-ABA-certified bachelor's level professionals as they implemented behavioral techniques with children with disabilities in various settings in person and through the internet (via video technology and a secure online portal)
- Conducted FBAs, created BIPs, monitored and evaluated the client's progress via observation, data collection, and graphing, and presented results to professionals, clients, and community members
- Educated family and community members regarding individuals with diversity factors such as a disability, as well as the basics of ABA
- Created training materials and business forms

08/2007-08/2009

Research Assistant

Kennedy Krieger Institute: Center for Autism and Related Disorders, Baltimore, MD

Supervisors: Rebecca Landa, Ph.D., CCC-SLP
Julie Rusyniak, M.S., BCBA

- Created local research protocols and forms for the Maryland Site of the CDC's Study to Explore Early Development (SEED), which examines risk factors for ASD and other neurodevelopmental disorders
- Worked with an interdisciplinary team at CARD and the Center for Autism and Developmental Disabilities Epidemiology (CADDE) at the Johns Hopkins Bloomberg School of Public Health as part of SEED
- Trained and supervised staff in protocol and data procedures
- Completed consent forms and interviews, and collected hair and cheek samples and diet diaries and stool diaries, from SEED study participants
- Assisted with blood draws, dysmorphology examinations, and developmental evaluations of SEED study participants
- Administered experimental tasks to infants and children with ASD and other neurodevelopmental disorders and typically developing infants according to research protocols, including the ESCS and a non-match to sample task
- Collected, entered, and managed data
- Set-up and videotaped evaluations of children with ASD and other neurodevelopmental disorders and typically developing children, which included the ADOS, Mullen, CSBS, TOLD, PPVT, WJ, the Stanford-Binet, a structured imitation task, a language sample, a measure of joint-visual attention, ADI-R, and Vineland

05/2005 – 05/2007

Behavior Specialist

May South (a former subsidiary of The May Institute), Atlanta, GA

Supervisor: Brad

Bezilla,

M.Ed.,

BCBA

- Implemented ABA in home and community settings with children with neurodevelopmental disorders, traumatic brain injury, and behavior problems
- Provided family therapy and parent training
- Provided social skills training with siblings and integrated peer groups
- Assessed clients and developed and monitored treatment plans
- Recorded, graphed, and analyzed behavioral data, prepared summaries, and presented them to clients and professionals
- Trained and evaluated parents, new staff, professionals, and other community members
- Received weekly live and traditional supervision

02/2004 – 01/2005

Teaching Assistant

Walden School at the Emory Autism Center, Atlanta, GA

- Implemented personalized instruction to children with ASD and typically developing children in highly structured, integrated, Pre-K and Pre-school classrooms via discrete trials and incidental teaching

06/2004-08/2004

Instructor's Assistant

Marlboro Early Learning Center, Marlboro, NJ

- Provided group and individual instruction to first-grade children with ASD in a small elementary classroom setting

06/2001 – 05/2005

ABA Therapy Provider

Private Residences, New Jersey & Georgia

- Implemented ABA therapy in one-on-one home environments with children with ASD
- Recorded data, evaluated progress, and adjusted programs according to student's abilities and motivations
- Trained family members and new therapists

06/2001-08/2001

Junior Camp Counselor

Daisy Recreation Summer Program, East Brunswick, NJ

- Supervised children with special needs ages 2-6 years old with the goal of stimulating social, emotional, behavioral, and communication growth and development in a day camp setting

Supervised Practicum Experience

08/2013-Present

Predoctoral Intern (anticipated completion 08/2013)

Trinitas Regional Medical Center, Elizabeth, NJ

Supervisors: Rodger Goddard, Ph.D. (Internship Director)
Lana Farina, Psy.D.
Fawn McNeil-Haber, Ph.D.+
Lucille Esralew, Ph.D.

- Conducted intake assessments, individual psychotherapy, family psychotherapy, and group psychotherapy in the Child/Adolescent Outpatient Unit and the Adult Outpatient Unit
- Conducted psychological testing and assessment with children, adolescents, and adults on residential, inpatient, partial hospital, and outpatient units, including BDI-II, CAST, CSI-4, CVLT-C, CPT, NEPSY-II, PIC-2, PPVT-II, VMI, WAIS-IV, WASI-II, WIAT-III, WISC-IV, WMS-IV, WPPSI-III, The Lawton Instrumental Activities of Daily Living Scale, UCLA PTSD Reaction Index for DSM IV (Child Version), Rorschach, Sentence Completion, TEMAS, Kinetic Family Drawing
- Conducted testing (Autism Diagnostic Observation Schedule, ADOS) and training/supervision of staff on the Dual Diagnosis Inpatient Unit, specializing in inpatient services for individuals with neurodevelopmental disorders and mental illness
- Provided clinical, psychoeducation, consultation, program development, assessment, and presentation services for Wellness Management Services, a corporate and school organizational development and training program
- Conducted individual and group Dialectical Behavioral Therapy (DBT) in the Adult Outpatient Unit as a member of the DBT team
- Consulted with the hospital's oncology department
- Conducted and participate in an evidence based research project
- Participated in a variety of clinical team meetings
- Participated in 6 intern seminars
- Participated in 4 supervision sessions per week

09/2011-05/2012

Fourth Year Extern

Mt. Washington Pediatric Hospital, Baltimore, MD

Supervisor: Shira Benhorin, Ph.D.

- Provided individual feeding treatments to infants, toddlers, and children with a variety of feeding problems using a multidisciplinary team approach including caregivers, medicine, nursing, occupational therapy, nutrition and speech pathology in a day-treatment hospital setting
- Provided outpatient individual psychotherapy to children and adolescents, family therapy, and parent training in an outpatient mental health clinic as part of a pediatric hospital
- Participated in weekly individual supervision

09/2010-05/2011

Third Year Extern

Mt. Washington Pediatric Hospital, Baltimore, MD

Supervisors: Caitlin Joy, Psy.D.
Kenneth Gelfand, Ph.D.
Nina Kayce, Psy.D.

- Provided individual psychotherapy to children and adolescents, family therapy, and parent training in an outpatient mental health clinic as part of a pediatric hospital
- Administered psychoeducational test batteries to children and adolescents, including ABAS, BASC-2, BRIEF, BYI, CDI, Children's Sentence Completion Test, CTOPP, GADS, GARS, GORT-4, OWLS, RCMAS, TAT, VMI, WIAT III, WISC IV, WRAML-2, WRAVMA, and Clinical Interview
- Participated in case conferences
- Participated in weekly individual and group supervision of individual child and adolescent therapy and assessment cases

08/2009-08/2010

Second Year Extern

Loyola Clinical Centers, Behavioral Health & Assessment Services, Baltimore, MD

Supervisors: Allyson Kett, Psy.D.
Adanna Johnson, Ph.D.
Mary Jo Coiro, Ph.D.

- Provided individual psychotherapy to children and families, as well as parent training at an urban community mental health clinic
- Co-led a 10-week social skills group for sixth through eighth graders
- Administered psychoeducational test batteries to children and adolescents, including ASD, BASC-2, CDI, Children's Sentence Completion Test, CMS, Connors 3, CPT II, CTOPP, CVLT-C, DKEFS, GORT-4, Grooved pegboard, RCMAS, TAT, VMI, WIAT II, WISC IV, WJ III, and Clinical Interview
- Wrote assessment reports, participated in multi-disciplinary case conferences, and provided feedback to assessment clients
- Participated in weekly individual and group supervision of individual child therapy, social skills group, and child and adolescent assessment
- Mentored a first year PsyD extern in child psychoeducational assessment
- Served as a behavioral and ASD consultant for psychology and speech clinicians on an as-needed basis

08/2008-05/2009

First Year Extern

Loyola Clinical Centers, Behavioral Health & Assessment Services, Baltimore, MD

Supervisors: Rachel Grover, Ph.D.
Corine Hyman, Ph.D.
Mary Jo Coiro, Ph.D.

- Completed intake interviews at an urban community mental health clinic for children and adults who were seeking therapy, social skills group, or psychoeducational or multidisciplinary assessment
- Co-led a social skills group for 6th graders at a Baltimore City school
- Conducted a school observation for a child assessment client
- Participated in weekly group supervision of intakes, social skills group, and assessments
- Participated in multi-disciplinary case conferences

Dissertation Research

02/2009-02/2013 **Loyola University Maryland, Baltimore, MD**

Principle Investigator

Committee: Mary Jo Coiro, Ph.D.
Rebecca Landa, Ph.D., CCC-SLP
Sharon Green-Hennessy, Ph.D.

I examined the associations between specific elements of language, joint attention, and play development through standardized assessments and videotaped observations of toddlers with ASD enrolled in a 6-month classroom intervention at Kennedy Krieger's Center for Autism and Related Disorders.

Current Professional Organization Memberships

American Psychological Association (APA)
NJ Psychological Association
Mercer County Psychological Association
Association for Behavior Analysis International (ABAI)
NJ Association for ABA
Autism NJ

Other Related Activities

7/2015-Present Ability Tree NJ – Team Leader/Executive Director
10/2013-Present Active in supporting National Alliance on Mental Illness (NAMI-Mercer)
09/2008-Present Speak at conferences, schools, and support organizations about psychology related topics such as psychoeducational testing, mindfulness, and autism
09/2006-08/2013 e-Buddies: member
09/2003-05/2006 Emory's Best Buddies International: Chapter President, member

Scholarships and Academic Awards

2011-2012 Plotkin Memorial Scholarship Winner
2011-2012 Loyola University Maryland Psy.D. Clinical Training Scholarship
2011 Passed Doctoral Written Comprehensive Exam, with Distinction
2010-Present Member of Psi Chi
2008-2013 Loyola University Maryland Psy.D. Grant- Merit

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 Advisor:

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Fall Term Reports

Eleventh Grade, 2017-2018

Course	Teacher	FI	FT	SI	ST	PX	CG
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11s Seminar

Ms. Michele Miller

P

P

11s Seminar is a yearlong course that contains curricular strands that are important to and relevant for juniors. Health and Wellness were the main focus of the second half of the Fall Semester. Students first met with school counselor, Megan Du Vall, to study mental wellness and talk about suicide prevention. Next, emotional wellness through self-care and positive self-image and self talk were discussed in class and then in the form of a written reflection after students watched Cameron Russel's TED Talk, "Looks aren't everything. Believe me, I'm a model." Seminar is a pass/fail class.

English 11 B

Ms. Michele Miller

A

A

Students wrapped up their study of *The Norton Anthology* with the completion of a creative writing portfolio that required them to create a cover page and cover letter to introduce the four pieces written throughout the first half of the term in the styles of description, narrative, comparison and contrast, and argument. They had previously received feedback and were able to revise their original versions. Next, the class moved on to Arthur Miller's *The Crucible*. Students first studied the context from which Miller was writing, focusing on how and why he used the colonial period of early American History and the witch trials in Salem, Massachusetts as a commentary on the 1950's Red Scare and McCarthyism. Students read and acted out the play in class, and homework consisted of comprehension and analysis questions. Finally, the semester ended with an essay responding to whether John Proctor's summation that "vengeance is walking Salem" was accurate. English Department grade categories and percentages are broken down as follows: 15% Work Habits, 35% Skills, and 50% Content Standards.

is a quiet but thoughtful and engaged student. Her creative writing portfolio met and exceeded a majority of the expectations described. She should be proud of the final product that was a result of her hard work and dedication to our community of writers this semester. Her final essay displayed her control of language and strong voice. It was mature and demonstrated that she connected with and really explored the play's themes within the context of human nature. She is a talented writer who is able to connect with and engage her reader. She will benefit from remembering to never assume that her reader knows what she means, and provide explicit context and analysis. 's grade breakdown is as follows: Work Habits 99%, Skills 93%, and Content Standards 95%, leaving her with a final grade of 95% A.

Comparative Government and Economy B

Ms. Paige Scharite

A

A

Comparative Government finished its Fall Semester with a focus on the different types of Republics that have existed in the world. The students looked at sources that presented information on direct democracy, indirect democracy, and republic. They compared and contrasted the ideas of each specific governmental system and determined the distinct qualities that separated the three from each other. The students moved on to the different types of Monarchies that exist in the world, constitutional and absolute, and compared and contrasted their specific qualities. There was a specific concentration on the British Monarchy to help enhance their understanding of a monarchy and how a country runs under one. They wrote a research paper on a specific question asked about monarchies and the world today. Lastly, communism and dictatorships were discussed with comparing and contrasting their major ideals. The final exam was a research paper that asked "which form of government is the hardest to live under as a citizen and why"? The students could use any one of the forms of government that were discussed throughout the semester to answer this question. Students expressed their knowledge through multiple projects, quizzes, and tests, along with a written final exam. Grades for this class are determined as follows: 50% Content; mastery of material through assessments, 35% Skills; mastery of material through improving work and study habits, and 15% Work Habits; on time to class, homework completed, and participation in class.

has been a wonderful addition to the Purnell community. Her hard work ethic has been a consistent force throughout the whole year, and she has been able to maintain this with ease. Her timeliness, preparedness, and engagement within the classroom has not gone unnoticed. She continued to be highly engaged with the content that is being taught to her. Her individual work is done with great attention to detail and effort. She also works well with others within the classroom. She contributes greatly to partner or group work and is able to help lead the group to their goals. For the final, the students wrote a research paper that asked "which form of government is the hardest to live under as a citizen and why"? For her final paper, she was able to research the topic well, plan out her paper efficiently, and write a paper with a clear thesis and solid supporting evidence. She received a 93% on this paper. Her grade break down for the Fall Semester is as followed: Content 95% Skills 95%, Work Habits 97%. Overall 96%, A.

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Fall Term Reports

Eleventh Grade, 2017-2018

Course	Teacher	FI	FT	SI	ST	PX	CG
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Algebra II B

Ms. Nicole Dowd

A

A

Algebra II is a year-long course with the goal of developing and practicing problem-solving skills using algebra. The second half of the first semester the class learned and expanded upon the following concepts: linear equations, graphing linear equations, solving systems of equations by graphing, solving systems of equations by substitution, and solving system of equations by elimination. This class uses several methods including videos, notes, task cards, and activities (both individual and group). Students are graded in the following categories: Tests and Projects 40%, Homework and Quizzes 40%, and Work Habits 20%.

continues to consistently be prepared, engaged, and an active participant during class. She works independently but explains steps or concepts well to classmates when asked. She worked diligently on her word problem project and earned a 100%, which included a presentation of her work in front of her classmates. She works efficiently in class and asks questions when she needs further clarification. She excelled at solving systems of equations and pursued extra topics such as word problems using system of equations and three variable system of equations. She earned a 100% on the Review Packet for Test 2 and a 100% on Test 2. grade breakdown is as follows: Tests and Projects: 99%, Homework and Quizzes: 99%, and Work Habits: 100%, for a total grade of 99%, A.

Conceptual Physics

Mr. Peter Pasterczyk

A

A

Conceptual Physics is a science elective designed to be a study of basic physical concepts and their application to the phenomena that surround us in our everyday lives. The class focuses primarily on the study of mechanics: linear and projectile motion, inertia, forces, impulse and momentum, work and energy, circular motion, rotational mechanics, and universal gravitational interactions. During the second half of the fall term in Physics, students continued their study of gravity by examining gravity's role in affecting the motion not only of objects in freefall or of objects launched vertically but of those launched at an angle and following the arced paths of projectiles as well. The tail end of the fall term in Conceptual Physics was devoted to the examination of Newton's 1 Law of Motion — The Law of Inertia — and how it applies both to objects at rest and to objects in motion. Students saw and discussed numerous demonstrations showing this law in action and then created their own videos both to demonstrate and to explain the effects of an object's inertia. The unit then progressed to a study of forces which encompassed concepts such as net force, vector diagrams, static and dynamic equilibrium, and terminal velocity. The term ended with an exam which required students to synthesize their understanding of motion concepts in order to interpret and to explain real-world scenarios. Grades for the course are determined as follows: Summative Assessments (40%), Formative Assessments (40%), and Work Habits (20%).

finished off the fall term in Conceptual Physics very well. She was consistently attentive and enthusiastic during class discussion and activity, and she regularly demonstrated a strong grasp of the concepts being covered. She wrote and solved a strong set of gravity problems; she scored perfectly on her Projectile Motion Test; she demonstrated and explained inertia concepts well in her video; and she performed very well on her Law of Inertia test. She has a natural propensity for understanding and working with physical concepts, and her strong work ethic makes the material easy for her. Curiosity and a continued attention to being proactive will enable her to achieve continued success at the start of next term in January. fall term grade is a 95% (A), based on the following averages: Summative Assessments (96%), Formative Assessments (92%) and Work Habits (100%).

Art History: Art and Mythology

Mr. Joshua Eckert

A

A

Art and Mythology investigates world religions and the art inspired by these religions. As separate cultures evolved across the planet, they created distinct forms of visual expression (art) and religion. Via discussions, timelines, and projects, students learn about the roots of Judaism, Christianity, and Islam. They also learn about the psychology of art, including our deepest motivations for art making and art consumption. Art and Mythology is a semester-long course. Assessment is weighted: Content 60%, Skills 25%, Work Habits 15%.

For her intellectual curiosity and her work ethic, is a joy to have in class. She adds interesting insights to class discussions of religion and psychology. She is dependable when she works with a group, and she shows leadership potential. She also shows great attention to detail and resourcefulness, particularly on the historic pigment project. Her high grade reflects her strong work in the class. has an A, 95%, in Art and Mythology. The assessment breakdown is: Content 95%, Skills 92%, and Work Habits 100%.

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Course	Teacher	FI	FT	SI	ST	PX	CG
Photography I	Ms. Donna Andeskie	A	A				

Introduction to Photography was a semester long course that provided students with the basics of film and digital photography. This class taught the operation of the digital camera and simple photo manipulation software and also the basics of film photography and paper printing. This course began with the history of photo and highlighted artists that developed the medium. The students learned about what makes for an interesting and skillful photograph. During the second half of the semester, the students learned how to cut a mat, use their own subject in combination with appropriated imagery and learned darkroom basics with enlarger collages and pinhole camera photographs. Introduction to Photography was graded using the following criteria: Skills 45%, Content 45% and Work Habits 15%.

exceeded the project expectations and standards in every assignment. She consistently looked beyond project parameters to develop imagery that was creative and expressed her personal vision. Her pinhole camera was well constructed and resulted in the image of a doorway that is a little spooky and otherworldly. proved herself to be meticulous in darkroom process as well as creative in her images and content. earned an A, 98%, in Introduction to Photography. The grade breakdown is as follows: Skills 99%, Content 96% and Work Habits 100%.

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SI Comments

Eleventh Grade, 2017-2018

Course	Teacher	FI	FT	SI	ST	PX	CG
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11s Seminar Ms. Michele Miller P P P

Student Comments

11s Seminar is a yearlong course that contains curricular strands that are important to and relevant for juniors. Peace and Justice were the main focus of the first half of the term. Students involved themselves in the study of Martin Luther King Jr., the dangers of fast fashion, and issues of social justice within the context of pain, pride, and privilege. The following TED Talks were used as additional supplements: Chimamanda Ngozi Adichie's "The danger of a single story," Drew Dudley's "Everyday leadership," and Tavi Gevison's "A teen just trying to figure it out." Seminar is a pass/fail class.

English 11 B Ms. Michele Miller A A A

Student Comments

Students started the term reading Zora Neale Hurston's *Their Eyes Were Watching God*, focused on Hurston's themes of individual empowerment, erasure of racial lines, womanism, feminism, and issues of gender. Other topics of study and conversation included the Harlem Renaissance, Jim Crow Laws, and how Hurston's life influenced her writing. Juniors were able to choose their paper topic from a list of sixteen argumentation and explanatory prompts. English Department grade categories and percentages are broken down as follows: 15% Work Habits, 35% Skills, and 50% Content Standards.

is a quiet and conscientious student. Her paper examining the use of nicknames in the novel was exemplary. She should be extremely proud of it. s mid-semester grade breakdown is as follows: Work Habits 100%, Skills 95%, and Content Standards 97%, leaving her with the current grade of 96% A.

Illustration Mr. Joshua Eckert A

Student Comments

In Illustration, students create colorful, imaginative works. Emphasis is on teaching them to draw and paint what they imagine using believable perspective, light, and shadow. In the first half, the students learned about 1-point perspective and limited palettes. They created a range of projects demonstrating their understanding of core and cast shadows. For example, they paint objects in space and rooms that come strictly from their imaginations. Illustration is a semester-long course. Assessment is weighted: Content 55%, Skills 35%, Work Habits 10%.

shows strong technical skills in her paintings. Her objects-in-space painting was especially successful: she laid down beautiful tones and showed meticulous attention to detail. She also challenged herself on her ideal bedroom painting, turning the whole scene into a music studio. is respectful to her classmates, and she talks thoughtfully about her growth as an artist. Her high grade reflects her good work in this course. At midterm, has an A, 98%, in Illustration. The assessment breakdown is: Skills 97%, Content 99%, and Work Habits 100%.

Comparative Government and Economy B Ms. Paige Scharite A A

Global Economics B Mr. William Warlick A

Student Comments

Global Economics a semester long course. It is an introduction to both microeconomics and macroeconomics, studying basic economic concepts such as supply and demand as well as the ways they function in the real world. In the first half of the spring semester, students focused on the processes of economic thinking. The assessment involved a group activity where the students were given definitions of certain concepts and then they put the definitions in their own words, found real world examples, and then presented their concepts to the other group. The midterm was a short answer question based on economic thinking. Student work is evaluated on the following categories: Content Standards 50%, Skills 40%, and Work Habits 10%.

For the processes of economic thinking activity, was an active leader for her group. She completed all of her tasks in a timely fashion and then helped her group members with any tasks that were not complete. Her individual work was excellent. This was evident in both her paraphrased definitions and the pertinent real world examples she found for her concepts. She continued her stellar work on the midterm question by not only producing a cohesive prevrite but by also writing a practice answer. This allowed her to construct an answer that was correct and had more than the required three examples and four vocabulary words. Her percentages are: Content Standards 92%, Skills 94%, and Work Habits 99%. Her spring midterm mark is 93% or A.

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SI Comments

Eleventh Grade, 2017-2018

Course	Teacher	FI	FT	SI	ST	PX	CG
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History of Abraham Lincoln Ms. Paige Scharite

A

Student Comments

The History of Lincoln and the Civil War is a semester elective course. The course began comparing and contrasting the people of the North and the people of the South. Understanding these fundamental differences, students then examined the four causes of the Civil War: economic and social differences, State vs. Federal Rights, Slave States vs. Non-Slave States, and the Election of 1860. Students focused on the issue of Slave States vs. Non-Slave States the most since it is the main reason the country went to war. Understanding the background of the war, students moved on to examining Mr. Lincoln's life before becoming president. Students were presented with multiple primary sources in which Lincoln made his claims for and against the freeing of African Americans. These documents are not usually shown within a classroom because they do not promote the idea of Lincoln as the "Great Emancipator". However, students examined how Lincoln's opinions about freeing African Americans changed over the course of his life, especially during the war. Students were asked to generate a persona of different people who lived back then. These people included Confederate Soldiers and Union Soldiers, Poor Whites in the South, Slaves in the South, Women in the North, Women in the South, Plantation Owners, Free Blacks in the North, Pro-Slavery believers and Abolitionists. Grades for this class are determined as follows: 50% Content: mastery of material through assessments, 35% Skills: mastery of material through improving work and study habits, and 15% Work Habits: on time to class, homework completed, and participation in class.

is a student who always comes to class ready to learn. She is a student who has no trouble providing consistent class participation. Her work is always done with much thought and diligence, portraying a great understanding of the content being studied. One of her biggest strengths is to pick out the most important information through historical readings and documents, and relate them to the assignments and questions being asked. She has a wonderful rapport with her fellow peers; they love hearing what she has to say and they respect her thoughts and ideas. Even in small group settings, she has a strong ability to let her knowledge guide her and allows for her to be a successful group member. For the midterm, the class created skits based on the ten identities of the war. These skits were to explain and show the opinions, beliefs, and attitudes each contrasting identity felt of one another. She received an 88% on the group portion and a 100% on the personal grade portion. Her grade break down so far for the Spring Semester is as followed: Content 94% Skills 95%, Work Habits 95%. Overall 94%, A.

Algebra II B

Ms. Nicole Dowd

A

A

A

Student Comments

Algebra II is a year-long course with the goal of developing and practicing problem-solving skills using algebra. The first semester the class learned and expanded upon the following concepts: the real number system, properties of real numbers, order of operations, simplifying expressions, solving equations, solving literal equations, solving absolute value equations, solving inequalities, solving absolute value inequalities, solving system of equations by graphing, solving systems of equations by substitution, and solving systems of equations by elimination. The first half of second semester the class learned about the quadratic equation. The class learnt how to solve the quadratic equation by graphing using a graphing calculator, by factoring, by square roots, and by the quadratic formula. This class uses several methods including videos, notes, task cards, and activities (both individual and group). Students are graded in the following categories: Tests and Projects 40%, Homework and Quizzes 40%, and Work Habits 20%.

works diligently inside and outside the classroom. She consistently arrives to class on time and is prepared for class with the correct materials. She works independently on topics that are often different from her classmates. Topics that she covered included graphing quadratics using the graphing calculator, the complex number system, solving quadratics by square roots, solving quadratics by the quadratic formula, the proof of the quadratic formula, the discriminant, choosing the best method to solve quadratic equations, and quadratic regression. As she works on her independent topics, she also clearly and patiently answers questions from classmates. She earned a 100% on Quiz 1 Graphing Quadratics, a 97% on Quiz 2 Square Root Method and Complex Numbers, and a 95% on Quiz 3 The Discriminant and Choosing the Best Method. She earned a 100% on the class summative assignment showing each method of solving quadratic equations learnt in class as well as 100% on her proof of the quadratic formula. 's grade breakdown is as follows: Tests and Projects: 98%, Homework and Quizzes: 97%, and Work Habits: 97%, for a total grade of 97%, A.

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SI Comments

Eleventh Grade, 2017-2018

Course	Teacher	FI	ET	SI	ST	PX	CG
Conceptual Physics	Mr. Peter Pasterczyk	A	A	A			

Student Comments

The first half of the spring term in Physics started with a group lab experiment wherein students investigated Newton's 2nd Law of Motion by collecting time data for people of varying masses being pulled along the gym floor by a constant force while on roller blades. The collected data and resulting graphs were used to draw conclusions about force, mass and acceleration and their relationships with regard to direct and inverse variation. Students then completed a digital presentation project connecting the lab to the three components of Newton's 2nd Law of Motion. Next, the class briefly investigated Newton's 3rd Law of Motion — action and reaction — and examined how it works in tandem with Newton's 2nd Law, investigating the cause and effect relationship that exists between force and the accelerations of interacting objects. Students worked as individuals or in pairs to create two successive drafts of a video explaining and demonstrating these relationships, and they followed this up with a summative quiz. Recently, the class completed a unit on impulse and momentum, investigating and analyzing scenarios involving the conservation of momentum, collisions and bouncing. This unit culminated with each student's creation of a short, summary graphical presentation and a summative test at midterm. Grades for the course are determined as follows: Summative Assessments (40%), Formative Assessments (40%) and Work Habits (20%).

■■■■ has had a very successful start to the second term in the Conceptual Physics class. She has remained an attentive and curious student, often interjecting comments and questions into class discussion that illustrate the degree to which she is following along. She consistently demonstrates a strong work ethic, completing all assignments on time while highlighting salient detail. She responded well to feedback on her preliminary work for the Skater Lab, and her final Skater Lab Project was very well done, meeting all of the assignment criteria and demonstrating her internalization of the three components of Newton's 2nd Law of Motion. Her video on Newton's 3rd Law was very well done, and she earned a perfect score on the associated quiz. Her final Momentum and Impulse Graphic Presentation met all of the expectations, and it comes as no surprise, therefore, that her score on the associated midterm test was very strong. She is to be commended for her strong work ethic and for the success that it has enabled her to achieve to date in the course. ■■■■'s grade at midterm is a 94% (A), based on the following averages: Summative Assessments (95%), Formative Assessments (92%) and Work Habits (99%).

Art History: Art and Mythology	Mr. Joshua Eckert	A	A				
Photography I	Ms. Donna Andeskie	A	A				

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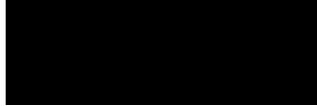


Services for Students with Disabilities
PO Box 7504 London, KY 40742-7504

Phone: (212) 713-8333 | Fax: (866) 360-0114 or (606) 330-1489

March 17, 2018

CC: Meghan Coates
PURNELL SCHOOL



SSD No. [REDACTED]

Dear [REDACTED]:

You have been APPROVED for the following accommodation(s) on College Board tests:

- 4-Function Calculator: Use of a 4-function calculator for math test sections that do not permit the use of calculator.
- Reading +50% (time and 1/2)
- Writing +50% (time and 1/2)
- Mathematical Calculations +50% (time and 1/2)

Additional Comments:

Please be sure to read the end of this letter for information regarding what to do after accommodations have been approved.

Attached is an Eligibility Letter which explains how these accommodations will be provided on the SAT®, PSAT/NMSQT® and Advanced Placement® tests. Please bring this letter with you on the day that you are taking a College Board test.

What you should do next:

- Notify your SSD Coordinator or School Counselor of the College Board test(s) you plan to take with your approved accommodations.
- If you plan to register for the SAT, be sure to include your SSD Eligibility Code during the registration process in order to receive your approved accommodations. If you are already registered for an upcoming SAT, contact College Board's SSD office for further information about the applicability of these accommodations to your upcoming test.

We wish you a successful transition to college.

Sincerely,
Services for Students with Disabilities

**Eligibility Letter**To: 

Date: March 17, 2018

SSD No.: 

Listed below are your approved accommodations for College Board tests. With limited exceptions, you will remain approved for these accommodations for all applicable College Board tests throughout your high school career (SAT®, PSAT, Advanced Placement® Tests). Bring this letter to the test administration to be sure that you are tested with your accommodations.

Please note that because of differences in test administration and the tests themselves, approved accommodations may be provided differently on different College Board tests. The following provides more specific information about how each accommodation will be provided:

PSAT/NMSQT and PSAT 10

You are approved for:

- 4-Function Calculator: Use of a 4-function calculator for math test sections that do not permit the use of calculator.
- Reading +50% (time and 1/2) :
The student is approved for extended time in reading. Because all test sections include reading, the student will be permitted the approved amount of extended time for the entire test, unless approved for more time for other sections. Students who test with extended time for the entire test will also be provided extra breaks.
- Mathematical Calculations +50% (time and 1/2)

ADVANCED PLACEMENT (AP®) EXAMS

You are approved for:

- Writing +50% (time and 1/2) :
Extended time for writing will be provided only for the free response sections of AP exams.
- 4-Function Calculator: Use of a 4-function calculator for math test sections that do not permit the use of calculator.
- Reading +50% (time and 1/2) :
The student is approved for extended time in reading. Because all test sections include reading, the student will be permitted the approved amount of extended time for the entire test.
- Mathematical Calculations +50% (time and 1/2) :
Extended time for math will be provided for subjects requiring mathematical calculations.

SAT

Some accommodations cannot be provided in national test centers. If you are approved for an accommodation that has an asterisk *, check with your school to find out when and where the test will be given. If you are approved for an accommodation that has an asterisk * and are either a home-schooled student, or your school does not administer the SAT or SAT Subject Test, please contact (212) 713-8333 to arrange for a test location.

SAT

You are approved for:

- Writing +50% (time and 1/2)
- 4-Function Calculator: Use of a 4-function calculator for math test sections that do not permit the use of calculator.
- Reading +50% (time and 1/2) :
The student is approved for extended time in reading. Because all test sections include reading, the student will be permitted the approved amount of extended time for the entire test, unless approved for more time for other sections. Students who test with extended time for the entire test will also be provided extra breaks.
- Mathematical Calculations +50% (time and 1/2)

SAT SUBJECT TEST™

You are approved for:

- **4-Function Calculator:** Use of a 4-function calculator for math test sections that do not permit the use of calculator.
- **Reading +50% (time and 1/2) :**
The student is approved for extended time in reading. Because all test sections include reading, the student will be permitted the approved amount of extended time for the entire test.
- **Mathematical Calculations +50% (time and 1/2) :**
+50% extended time for math will be provided for subjects requiring mathematical calculations.

What To Do After Accommodations Have Been Approved

SAT® and SAT Subject Tests™

IF YOU HAVE ALREADY REGISTERED FOR THE SAT, you should contact the College Board Services for Students with Disabilities office at (212) 713-8333 to determine if you can apply your approved accommodations to your current registration. The representative will ask you for your SSD Number, which is on the first page of this letter. Keep in mind that it takes time to make appropriate arrangements at a testing site (e.g., proctor, space, shipped materials), and the College Board receives numerous requests before each test date. Therefore, it is extremely unlikely that a change request can be applied to a test if it is made less than two weeks before a test date, or if it is the result of an eligibility request received and determined to be complete after the published deadline. If your SSD Eligibility Request and documentation (if required) was received after the deadline, approved accommodations will be effective for future administrations.

IF YOU HAVE NOT YET REGISTERED FOR THE SAT, you can register online or by mail. Register online at collegeboard.com. Be sure to enter your SSD Number when prompted. Register by mail by submitting a completed SAT Registration Form along with a copy of your Student Eligibility Letter.

IMPORTANT TIPS FOR SAT TESTING:

- Arrive early to the test center. A little extra time will help the Test Center Supervisor direct you properly.
- Many accommodations are administered in a separate testing room. If you think you may have been directed to an incorrect room, immediately ask the room proctor for confirmation.
- If at any point you are uncertain whether you are receiving your approved accommodations, ask a test center staff member for confirmation.

PSAT/NMSQT®, PSAT 10, PSAT 8/9 and Advanced Placement® Exams:

If you plan to take the PSAT/NMSQT, PSAT 10, PSAT 8/9 or AP® Exams, make sure that your school is aware that you have been approved for accommodations, so that the correct materials can be ordered.

Changing Accommodations

If your needs change, and you wish to request a new accommodation or remove an approved accommodation, submit an Accommodations Change Request Form. This form may be downloaded from the College Board website, at www.collegeboard.com/ssd/forms, or may be obtained by contacting College Board Services for Students with Disabilities at (212) 713-8333. If you are requesting that an accommodation be added, you must also submit documentation to support your request.

Resubmitting Requests for Accommodations that were Not Approved

If some of your requested accommodations were not approved, consider whether the approved accommodation(s) would effectively accommodate your disability. Understand that when reviewing requests for accommodations, the College Board thoroughly considers all requested accommodations, as well as some related accommodations. If you believe that the approved accommodation(s) are not sufficient, you may submit new documentation to the College Board for review. Requests for re-review must be in writing. If you do not understand why the request was not approved, you may wish to discuss the determination by contacting our office at the phone number or e-mail address indicated on the decision letter. If accommodations were requested online, ask your school to print out a submission cover sheet to include with the new documentation.

Testing without Accommodations

If you choose to not use your approved accommodation(s) on a College Board test, you have three options

1. Submit an Accommodations Change Request Form, requesting that the accommodations be removed. (See Changing Accommodations, above); or
2. For the SAT®, do not enter your SSD Number when registering for the test; or
3. Submit a signed notice, in writing to your school (for AP or PSAT/NMSQT) or test center (for SAT), indicating that you do not wish to test with accommodations. For students under age 18, the notice must be signed by a parent or guardian.

MELISSA DOLGOS

• 16 Loveland Street, Apt. 2, Madison, NJ, 07940 • 908.268.4049 • Yosifa85@yahoo.com•

SUMMARY

Seeking a challenging position in the mental health field that utilizes and builds upon skills acquired through both past education and experience

ACHIEVEMENTS & SKILLS:

- License Associate Counselor (LAC)
- Conversational Spanish Skills
- Achieve 90% or higher on Quality Improvement, Supervisory, and Peer Chart Reviews while consistently meeting and exceeding monthly contact requirements in Easter Seals
- Received a promotion to Senior Case Manager for one year while at Easter Seals
- Trained in Dialectal Behavior Therapy and utilize the theory clinically.
- Experience with Asperger and Autistic population as well as geriatric and adolescents

EXPERIENCE

IMMEDIATE CARE CHILDREN'S PSYCHIATRIC CENTER

Clinician

Parsippany, NJ
July 2015 - May

- Provide group and individual therapy to adolescents and adults
- Conduct weekly family sessions
- Assisted with making schedule changes as well as ideas that could help to improve the program.

2016

Senior Clinician

- Provide group and individual therapy to adolescents and adults
- Conduct weekly family sessions
- Supervise bachelor and master's level interns
- Supervise and clinically support other clinicians and staff
- Conduct interviews with the executive director
- Assist with administrative responsibilities, e.g. making/adjusting the schedules, assigning group topics, completing in-service trainings, and make administrative decisions as approved by the executive director
- Complete biopsychosocial assessments for new admissions.

June 2016 - present

GENPSYCH

Therapist

- Provide individual therapy to adolescents and adults and those with special needs once per week
- Provide coaching for clients when in a state of crisis
- Facilitate groups that are educational including Dialectal Behavioral Therapy groups
- Coach clients in a state of crisis through a 24 hour DBT hotline
- Conduct family session every other week for those who agree to have family involved
- Assess for suicidal and/or homicidal thoughts, plan or intent as well as ability to contract for safety

Livingston, NJ
May 2013 – May 2015

NEW JERSEY MENTOR

Therapist

- Provide individual therapy to adolescent males aged 15 to 19, twice a week
- Provide group therapy to adolescent males three times a week
- Enroll the residents into school and assist them in becoming adjusted to the new environment
- Provide family therapy
- Hold treatment team meetings once a month

Hackettstown,
NJ
September 2012 – April
2013

EASTER SEALS OF NEW JERSEY

Case Manager, Integrated Case Management Services (ICMS)

Flemington, NJ
March 2009 - February
2012

- Provide case management services to 20 or more adults with persistent mental illness living independently in the community
- Responsible for establishing and maintaining ongoing therapeutic relationships and interventions with consumers
- Develop consumer focused, strengths based service plans based on the Wellness and Recovery Model
- Link and refer consumers to financial entitlements, community and mental health services while serving as a liaison between consumers and service providers to ensure consumer needs are being met
- Organize monthly recreation trips in order to increase socialization among consumers and decrease isolating behaviors
- Create and maintain positive relationships with various service providers including Social Services, Legal Services, and area food pantries, psychiatric and psychological services

Case Manager, Supportive Housing Program

June 2009 - February 2012

- Assist consumers with transitioning from homeless shelters or state psychiatric facilities into private residences within the community
- Manage all aspects of Division of Mental Health Services Housing Vouchers including obtaining and maintaining adequate housing, purchasing furniture and setting up utilities including telephone, electricity, and cable services
- Facilitate services for a Spanish speaking consumer utilizing conversational Spanish skills
- Complete administrative duties such as purchase orders, check requests and billing on a timely basis

JEWISH FAMILY SERVICES

Intern

Somerset, NJ
January 2009 - May 2010

- Provided individual counseling to clients from the ages of 7 years old up to 90 years old
- Facilitated and co-facilitated various support groups within the agency
- Utilized multiple therapeutic theories including Cognitive-Behavioral, Interpersonal, and Gestalt Therapies

HUNTERDON COUNTY BOARD OF SOCIAL SERVICES: ADULT PROTECTIVE SERVICES

Social Worker

Flemington, NJ
January 2009 - May 2010

- Investigated reports of suspected abuse, neglect, and exploitation of vulnerable adults living in the community
- Identified and implemented services to help the vulnerable person
- Conducted in-home visits and inspections in order to ensure the safety of the vulnerable person within his/her environment
- Collaborated with family members and other individuals in order to obtain collateral information

- Performed Mini Mental Status Examinations (MMSE) in order to determine levels of dementia

FITZMAURICE COMMUNITY SERVICE

Mental Health Worker

Stroudsburg, PA
January 2006 - May 2007

- Assisted mental health consumers in a group home setting with medication monitoring, basic health care, and activities of daily living skills
- Encouraged and educated residents on developing coping skills, communication skills and the importance of cooperation

SHAWNEE ACADEMY

Intern

Stroudsburg, PA
January 2003 - May 2003

- Co-facilitated therapeutic group and individual therapy
- Participated in development of treatment plans

EDUCATION

Farleigh Dickenson University

Master of Arts

Counseling Psychology

Madison, NJ

May 2010

East Stroudsburg University

Bachelor of Science

Psychology

East Stroudsburg, PA

May 2007

Minor

Spanish

LICENSED ASSOCIATE COUNSELOR

37AC00131500

August 2012

Megan Du Vall

Phone: 816-824-3141
meduvall11@gmail.com

Email:

EDUCATION

Master of Science in Counseling (CACREP Accredited)

December 2014

Oklahoma State University (OSU), Stillwater, Oklahoma

GPA: 3.8/4.0

Bachelor of Science in Psychology, Minor in Family Life and Resource Management May 2012

Northwest Missouri State University (NWSU), Maryville, Missouri

Overall

GPA: 3.47/4.0

License and Certifications

Certified School Counselor

- Certified in New Jersey and North Carolina

Licensed Associate Counselor

- Licensed in New Jersey

RELATED WORK

EXPERIENCE

School Counselor

Present

September 2016-

Purnell School, Pottersville, New Jersey

- Provides individual and small group counseling
- Assists and supports students in emotional and social development
- Collaborates with faculty, staff and parents to better understand each student to meet their needs
- Consults regularly with therapists in the community and makes appropriate referrals when necessary

Mobile Therapist

2016

June 2016-December

Pennsylvania Mentor, Bethlehem, Pennsylvania

- Assessed strengths and therapeutic needs of the client
- Used interventions identified in treatment plan to assist the client in reducing behaviors
- Supported caregivers to assist their child in achieving age appropriate social and emotional functioning
- Worked closely with caregivers to enable them to respond positively to their child

Summer Counselor/Coordinator

2015

May 2015-September

Sheltercare, Alexandria, Virginia

- Supervised and directed house routine and therapeutic programs
- Planned, organized and supervised summer educational and recreational activities
- Co-lead group orientation sessions
- Managed the daily budget for all summer programming

Graduate Teaching Assistant

December 2014

August 2013-

Oklahoma State University, Stillwater, Oklahoma

- Lectured to approx. 160 OSU undergraduate students—Total Wellness HHP 2603
- Taught two Total Wellness lab classes to undergraduates at Oklahoma State University

- Engaged students on different techniques and benefits of keeping the mind, body and overall health of the student in check
- Employed a variety of teaching styles including group work, videos, and presentations to keep students actively engaged and attentive

School Counseling Intern
2014

August 2013-May

Guthrie Jr. High School, Guthrie, Oklahoma

- Counseled 7th and 8th grade students on their personal issues
- Supported and built relationships with students within individual counseling and group counseling sessions
- Educated students in guidance lessons pertaining to social skills and time management
- Collaborated and consulted with faculty and parents about student growth and development
- Helped prepare state testing with other counselors at the Jr. High

OTHER

EXPERIENCE

Substitute Teacher
2016

February 2016- May

Onslow County, North Carolina School District

- Carried out program of study arranged in the lesson plans left by teacher
- Created a classroom environment that was conducive to learning
- Employed instructional methods and materials that are appropriate for meeting lesson objectives

Financial Aid Support Specialist
August 2014

January 2013-

Scholarships and Financial Aid Office, Oklahoma State University, Stillwater, Oklahoma

- Organized and coded students files
- Assembled scholarship letters and coordinated distribution
- Maintained confidentiality and professionalism at all times

PURNELL SCHOOL

March 27, 2018

Re: [REDACTED]

To Whom It May Concern:

I am Nicole Dowd, [REDACTED]'s math teacher for Algebra II at Purnell. I hold a BA in Mathematics from the University of Chicago and an MAT in Mathematics from the University of Florida. I have taught [REDACTED] since September of this current school year and have gotten to know her well both personally and as a student.

I am enclosing my report comments from the Fall Semester and from the recent Spring Interim progress report, which describe some of her challenges and progress she has made.

[REDACTED] performs well on our course content with the benefit of using her calculator and being in a small class of 8 students, including [REDACTED]. I am aware that she also receives the accommodation of calculator use for the SAT from CollegeBoard.

Other accommodations that benefit [REDACTED] are our use of a "flipped classroom," wherein I provide a video of a lesson to introduce content to students as their homework. We then apply the lesson or new content in class together with my guidance. [REDACTED] benefits from having the flexibility of pausing the instructional video anytime and watching it as many times as she feels necessary in order to grasp the new material.

I want to emphasize that her diligence and dedication to her academic work helps her to push past her challenges in compensate for her slower processing speed. She clearly has learned to compensate for her dyscalculia and processing speed weakness by dint of hard work and perseverance.

Since [REDACTED] came to Purnell last September, I have seen her blossom from a very shy and quiet girl into a much more confident person both academically and socially. Based on my experience teaching for the last 12 years, I can tell that [REDACTED] benefits from the smaller environment here at Purnell where she receives individualized attention to her learning needs.

Sincerely,



Nicole Dowd

1/3/2017

Schedule List View

3

School: West Morris Central High School Term: 16-17 Year Today is: 01/03/2017 (D4)

Schedule List View

10 F

LID:

SID:

WMC Cusack HR:

Active 504

Exp	Trm	Crs-Sec	Course Name	Teacher	Room	Enroll	Leave
01(D4-D5)	S1	90509-11	IRT	Rossi, Kenneth	CAFE	09/06/2016	01/28/2017
01(D4-D5)	S2	90509-12	IRT	Rossi, Kenneth	CAFE	01/28/2017	06/22/2017
02(D4-D5)	16-17	31230-2	French 2 (AV)	Wubbenhorst, Tamara	E127	09/06/2016	06/22/2017
03(D4-D5)	16-17	65030-3	Band (AV)	Schaefer, Margret	B115	09/06/2016	06/22/2017
04(D4-D5)	16-17	80209-41	Phys Ed 10	Hennelly, Kevin	GYM	09/06/2016	06/22/2017
04(D4-D5)	Q1	81209-41	Driver Ed Theory	Balella, Jim	E125	09/06/2016	11/10/2016
04(D4-D5)	Q2	81209-42	Driver Ed Theory	Balella, Jim	E125	11/14/2016	01/28/2017
05(D4-D5)	16-17	42230-5	Geometry (AV)	Kaell, Sarah	F133	09/06/2016	06/22/2017
06(D4-D5)	16-17	20330-6	US History 2 (AV)	Crouse, Henry	F146	09/06/2016	06/22/2017
07(D4-D5)	16-17	10230-7	English 2 (AV)	Herman, Robert	A135	09/06/2016	06/22/2017
08(D4-D5)	16-17	53230-82	Chemistry (AV)	Sumereau, Maria	F108	09/06/2016	06/22/2017

16-17 Year

Entire Year Schedule

1/3/2017

Quick Lookup

School: West Morris Central High School Term: 16-17 Year Today is: 01/03/2017 (D4)

Quick Lookup

10 F

LID:

SID:


WMC Cusack HR:

Active 504

Attendance By Class																					
Exp	Last Week					This Week					Course	Q1	Q2	Q3	Q4	X1	F1	Absences		Tardies	
	M	T	W	H	F	M	T	W	H	F								16-17	16-17	16-17	16-17
01(D4-D5)						AB					IRT 34 Rossi, Kenneth - Rm: CAFE		--	--	--	--		46	46	0	0
01(D4-D5)											IRT 34 Rossi, Kenneth - Rm: CAFE		--	--	--	--		0	0	0	0
02(D4-D5)						AB					French 2 (AV) Wubbenhorst, Tamara - Rm: E127	IC 100	A+ 100	--	--	--		43	43	0	0
03(D4-D5)											Band (AV) Schaefer, Margret - Rm: B115	IC 48.44	F 0	--	--	--		44	44	0	0
04(D4-D5)											Phys Ed 10 34 Hennelly, Kevin - Rm: GYM	0	P 90.48	--	--	--		37	37	0	0
04(D4-D5)											Driver Ed Theory Balella, Jim - Rm: E125	IC 85.33	--	--	--	--	IC 85.33	23	23	0	0
04(D4-D5)						AB					Driver Ed Theory Balella, Jim - Rm: E125		B 85.33	--	--	--		21	21	0	0
05(D4-D5)											Geometry (AV) Kaelli, Sarah - Rm: F133	IC 95.45	--	--	--	--		44	44	0	0
06(D4-D5)											US History 2 (AV) Crouse, Henry - Rm: F146	IC 86.36	--	--	--	--		45	45	0	0
07(D4-D5)											English 2 (AV) Herman, Robert - Rm: A135	IC 87	IC 0	--	--	--		44	44	0	0
08(D4-D5)											Chemistry	A	--	--	--	--		44	44	0	0

1/3/2017

Quick Lookup

D5)											(AV)  Sumereau, Maria - Rm: F108	96.24							
												Attendance Totals		391	391	0	0		
Current Unweighted GPA - Q2 GPA (Q2): 1.538																			
Show dropped classes also																			
Attendance By Day																			
Last Week					This Week					Absences		Tardies							
M	T	W	H	F	M	T	W	H	F	16-17	YTD	16-17	YTD						
						AB				56	56	0	0						
Attendance Totals										56	56	0	0						

New Jersey ASK Spring 2013 Individual Student Report

County: 27 MORRIS
 District: 5520 WASHINGTON TWP
 School: 035 LONG VALLEY MIDDLE
 State Student ID: [REDACTED]
 Local District/School ID: [REDACTED]

Answer Folder Number: 6421705
 Birth Date: [REDACTED]
 Grade: 6
 Test Date: Spring 2013



NJ ASK Proficiency Level	Partially Proficient 100-199	Proficient 200-249	Advanced Proficient 250-300	Your Child's Score
English Language Arts				225
Mathematics				225
	100	200	250	300

Understanding Your Child's Performance

Test Subject	Points Earned	Total Points Possible	Just Proficient Mean*
ENGLISH LANGUAGE ARTS			
Writing	12.0	18.0	9.8
<i>Persuasive</i>	8.0	12.0	6.5
<i>Informative/Explanatory</i>	4.0	6.0	3.3
Reading	36.0	52.0	28.2
<i>Literature</i>	9.0	13.0	6.7
<i>Informational Text</i>	27.0	39.0	21.5
Total for English Language Arts	48.0	70.0	38.0
MATHEMATICS			
Number & Numerical Operations	8.0	13.0	5.5
Geometry & Measurement	6.0	14.0	5.7
Patterns & Algebra	11.0	14.0	8.2
Data Analysis, Probability & Discrete Mathematics	7.0	8.0	3.6
Total for Mathematics	32.0	49.0	23.0

* "Just Proficient Mean" can be helpful to you in understanding where your child's performance may not be meeting expectations. The numbers in this column indicate the average points earned by students who scored 200 on a particular subject test. A score of 200 is the minimum score required for a student to be deemed "proficient" in that subject. Cluster scores are shown for students who took the regular form of the test or a form with the exact same set of items.

The NJ ASK is a set of standardized tests that allows you to compare your child's performance against grade level standards. The NJ ASK is only one measure of your child's academic performance. Other academic measures should be used in conjunction with the NJ ASK scores to make a determination of your child's overall academic performance (e.g., student grades, student progress reports and/or student classroom work).

For more information about the NJ ASK, please visit the NJ DOE website at <http://www.state.nj.us/education/assessment>, and the Measurement Inc. website at www.measinc.com/nj.

New Jersey ASK Spring 2014 Individual Student Report

County: 27 MORRIS
 District: 5520 WASHINGTON TWP
 School: 035 LONG VALLEY MIDDLE
 State Student ID: [REDACTED]
 Local District/School ID: [REDACTED]

Answer Folder Number: 7412334
 Birth Date: [REDACTED]
 Grade: 7
 Test Date: Spring 2014



NJ ASK Proficiency Level	Partially Proficient 100-199	Proficient 200-249	Advanced Proficient 250-300	Your Child's Score
English Language Arts				242
Mathematics				250
	100	200	250	300

Understanding Your Child's Performance

Test Subject	Points Earned	Total Points Possible	Just Proficient Mean*
ENGLISH LANGUAGE ARTS			
Writing	11.0	18.0	10.0
Argument	8.0	12.0	6.5
Narrative	3.0	6.0	3.5
Reading	39.0	52.0	27.0
Literature	11.0	13.0	7.7
Informational Text	28.0	39.0	19.3
Total for English Language Arts	50.0	70.0	37.0
MATHEMATICS			
Ratios and Proportional Relationships	5.0	8.0	2.5
The Number System	10.0	12.0	6.3
Expressions and Equations	11.0	15.0	7.7
Geometry	4.0	7.0	3.3
Statistics and Probability	7.0	7.0	3.2
Total for Mathematics	37.0	49.0	23.0

* "Just Proficient Mean" can be helpful to you in understanding where your child's performance may not be meeting expectations. The numbers in this column indicate the average points earned by students who scored 200 on a particular subject test. A score of 200 is the minimum score required for a student to be deemed "proficient" in that subject. Cluster scores are shown for students who took the regular form of the test or a form with the exact same set of items.

NJ ASK is a set of standardized tests that allows you to compare your child's performance against grade level standards. The NJ ASK is only one measure of your child's academic performance. Other academic measures should be used in conjunction with the NJ ASK scores to make a determination of your child's overall academic performance (e.g., student grades, student progress reports and/or student classroom work).

For more information about the NJ ASK, please visit the NJ DOE website at <http://www.state.nj.us/education/assessment>, and the Measurement Inc. website at www.measuring.com/nj.

#320192580

PERMANENT STUDENT RECORD

WEST MORRIS CENTRAL HIGH SCHOOL
CHESTER, NEW JERSEY 07930

STATE AND LOCAL MANDATED TESTING

New Jersey Assessment of Skills and Knowledge (NJ ASK) Science

Test Date: MAY 2015

County: 27 MORRIS

District: 5520 WASHINGTON TWP

School: 035 LONG VALLEY MIDDLE

Student Name: [REDACTED]

NJ ASK ID No.: [REDACTED]

Grade: 8

DOB: [REDACTED]

Sex: F

Science:

LEP:

SE:

APA:

250

SID: [REDACTED]

District / School ID No.: [REDACTED]

ADVANCED PROFICIENT





State of New Jersey
Department of Education

Date of Birth: [REDACTED] ID: [REDACTED] Grade: 9
WEST MORRIS REGIONAL
WEST MORRIS CENTRAL HIGH
NEW JERSEY

GRADE 9 ELA

English Language Arts/Literacy Assessment Report, 2015-2016

This report shows whether [REDACTED] met grade-level expectations and is on track to be college and career ready. **This assessment is just one measure of how well your child is performing academically.**

To learn more about the test and to view sample questions and practice tests, visit UnderstandTheScore.org.

How Can You Use This Report?

Ask your child's teachers:

- What do you see as my child's academic strengths and areas for improvement?
- How will you use these test results to help my child make progress this school year?

See side 2 of this report for specific information on your child's performance in reading and writing.

How Did [REDACTED] Perform Overall?

Performance Level 4

- Level 5 Exceeded Expectations
- Level 4 Met Expectations
- Level 3 Approached Expectations
- Level 2 Partially Met Expectations
- Level 1 Did Not Yet Meet Expectations

Your child's score

758



School Average

[REDACTED] 765

District Average

[REDACTED] 768

State Average

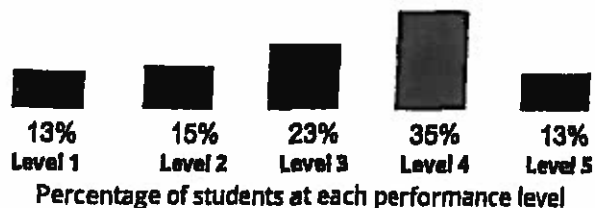
[REDACTED] 746

Cross-State Average

[REDACTED] 738



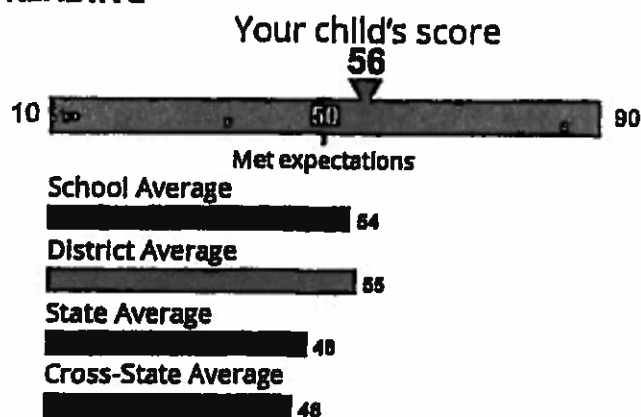
How Students in New Jersey Performed



The probable range in the student's overall score on this test is plus or minus 7.6 points. This is the amount of change that would be expected in your child's score if he/she were to take the test many times. Small differences in scores should not be overinterpreted.

How Did Your Child Perform in Reading and Writing?

READING



LITERARY TEXT

Your child performed about the same as students who **approached expectations**. Students meet expectations by showing they can read and analyze fiction, drama, and poetry.



INFORMATIONAL TEXT

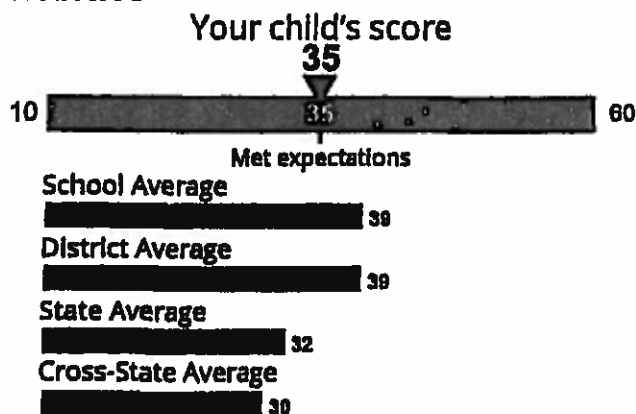
Your child performed about the same as students who **met or exceeded expectations**. Students meet expectations by showing they can read and analyze nonfiction, history, science, and the arts.



VOCABULARY

Your child performed about the same as students who **met or exceeded expectations**. Students meet expectations by showing they can use context to determine what words and phrases mean.

WRITING



WRITING EXPRESSION

Your child performed about the same as students who **approached expectations**. Students meet expectations by showing they can compose well-developed writing, using details from what they have read.



KNOWLEDGE AND USE OF LANGUAGE CONVENTIONS

Your child performed about the same as students who **approached expectations**. Students meet expectations by showing they can compose writing using rules of standard English.

LEGEND

Your child performed about the same as students who:



Met or Exceeded Expectations



Approached Expectations



Did Not Yet Meet or Partially Met Expectations

What are the PARCC tests? The tests measure how well students have learned grade-level material in English language arts/literacy and mathematics. Students who meet or exceed expectations are on track for the next grade or course and, ultimately, for college and careers. The tests include questions that measure your child's fundamental skills and knowledge, and require students to think critically, solve problems, and support or explain their answers. The test is one of several ways to help parents and teachers understand how well children are learning.

How will my child's school use the test results? Results from the test give your child's teacher information about his/her academic performance. The results also give your school and school district important information to make improvements to the education program and to teaching.

Learn more about PARCC and New Jersey's college- and career-ready standards

Explore your school website, or ask your principal, for information on your school's annual PARCC assessment schedule; the curriculum chosen by your district to give students more hands-on learning experiences that meet state standards; and to learn more about how test results contribute to school improvements. You can also learn more about New Jersey's K-12 standards at <http://www.state.nj.us/education/cccs/>.

For information on how to help your child, and access to actual PARCC test questions and the GreatKids Test Guide for Parents, visit UnderstandTheScore.org.



State of New Jersey
Department of Education

Date of Birth: [REDACTED] ID: [REDACTED] Grade: 9
WEST MORRIS REGIONAL
WEST MORRIS CENTRAL HIGH
NEW JERSEY

ALGEBRA I

Mathematics Assessment Report, 2015–2016

This report shows whether [REDACTED] met course-level expectations and is on track to be college and career ready. **This assessment is just one measure of how well your child is performing academically.**

To learn more about the test and to view sample questions and practice tests, visit UnderstandTheScore.org.

How Can You Use This Report?

Ask your child's teachers:

- What do you see as my child's academic strengths and areas for improvement?
- How will you use these test results to help my child make progress this school year?

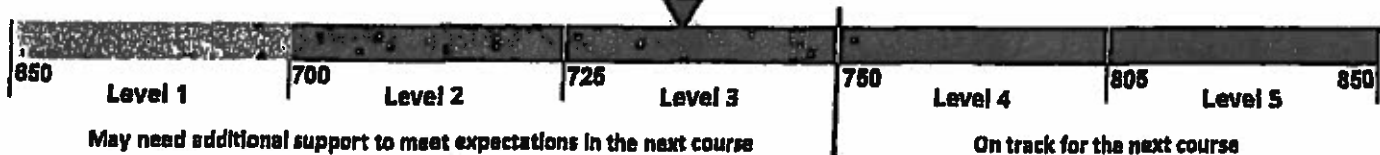
See side 2 of this report for specific information on your child's performance in mathematics.

How Did [REDACTED] Perform Overall?

Performance Level 3

- Level 5 Exceeded Expectations
- Level 4 Met Expectations
- Level 3 Approached Expectations
- Level 2 Partially Met Expectations
- Level 1 Did Not Yet Meet Expectations

Your child's score
735



School Average

[REDACTED] 747

District Average

[REDACTED] 741

State Average

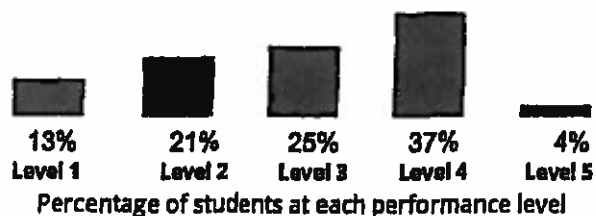
[REDACTED] 741

Cross-State Average

[REDACTED] 734



How Students in New Jersey Performed



The probable range in the student's overall score on this test is plus or minus 9.3 points. This is the amount of change that would be expected in your child's score if he/she were to take the test many times. Small differences in scores should not be overinterpreted.

How Did Your Child Perform in Areas of Mathematics?



MAJOR CONTENT

Your child performed about the same as students who **approached expectations**. Students meet expectations by solving problems involving arithmetic operations on polynomials, linear, quadratic, and exponential equations, an understanding of functions, and interpreting algebraic expressions, functions, and linear models.



EXPRESSING MATHEMATICAL REASONING

Your child performed about the same as students who **approached expectations**. Students meet expectations by creating and justifying logical mathematical solutions and analyzing and correcting the reasoning of others.



ADDITIONAL & SUPPORTING CONTENT

Your child performed about the same as students who **approached expectations**. Students meet expectations by solving problems involving properties of rational and irrational numbers, writing algebraic expressions in equivalent forms, systems of equations, interpreting data, and linear, quadratic, and exponential models.



MODELING & APPLICATION

Your child performed about the same as students who **approached expectations**. Students meet expectations by solving real-world problems, representing and solving problems with symbols, reasoning quantitatively, and strategically using appropriate tools.

LEGEND

Your child performed about the same as students who:



Met or Exceeded
Expectations



Approached
Expectations



Did Not Yet Meet
or Partially
Met Expectations

What are the PARCC tests? The tests measure how well students have learned grade-level material in English language arts/literacy and mathematics. Students who meet or exceed expectations are on track for the next grade or course and, ultimately, for college and careers. The tests include questions that measure your child's fundamental skills and knowledge, and require students to think critically, solve problems, and support or explain their answers. The test is one of several ways to help parents and teachers understand how well children are learning.

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PURNELL SCHOOL

10-12-17

To Whom This May Concern:

Since the school year started, [REDACTED] has been doing very well at Purnell. She has been keeping up with all of her classes and turning in all of her work on time. [REDACTED] has been very organized and knows all of her assignments. Even when she was out sick for a few days, [REDACTED] seemed comfortable asking each teacher for help. She set up meetings with each one to go over missed work. She seems to be a great advocate for herself.

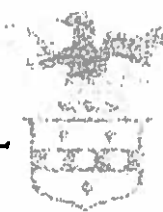
I have been meeting with [REDACTED] weekly and she explains how she is enjoying coming to Purnell and is starting to feel as though she is good at school. She has been opening up and is willing to work on some of her social anxiety surrounding school. She appears to be really trying to find herself here and is enjoying doing so. I think Purnell has been a great fit for [REDACTED] thus far.

Sincerely,

Megan Du Vall
Megan Du Vall

School Counselor
Director of Advising

PURNELL SCHOOL



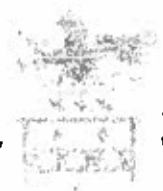
To Whom It May Concern:

My name is Megan Du Vall and I am the School Counselor at Purnell School. I have been working with [REDACTED] on a regular basis to help manage her stress, anxiety and depression. I am genuinely impressed by how far [REDACTED] has come at Purnell. This is only her first year but has already demonstrated overall great leadership and a desire to achieve in and out of the classroom.

When [REDACTED] first arrived at Purnell, she was quiet and reserved. [REDACTED] reported feeling at ease within the first month at Purnell and stated she enjoyed coming to school and felt as though Purnell was a good match for her. Her teachers have given her support in the classroom and have reported that when [REDACTED] needs extra help, the teacher/s will meet outside of the classroom to make sure she understands the materials. As the year progressed, [REDACTED] has grown more comfortable with her peers and has begun shedding her shyness. She is a natural introvert but has made close friendships with her classmates, feels comfortable speaking her opinions in class and has gotten out of her comfort zone.

[REDACTED] became one of the leads in our school play this spring and did a wonderful job. Even though "try-outs" made her anxious, she pushed past those

PURNELL SCHOOL



feelings and performed brilliantly. [REDACTED] had to learn all of her lines and singing numbers in just two weeks before

opening act. She performed amazingly on stage and looked very comfortable

██████ has also stated that she gets anxious in a certain class because she knows her views/opinions can be different from other peers. This class is chosen by her and is not mandatory. Even though ██████ feels anxious and becomes uncomfortable she decided to stay in the class for the entire year. She has stated how she does not want to run from her anxiety but instead, face it head on.

As the School Counselor, I put on a Positivity Group at Purnell and asked ██████ to be apart of it. She has been a great leader. She comes up with ideas that we can do each month for other students and is always happy and laughing while we work on projects.

██████ and I meet on a weekly basis to work on finding strategies to lessen her stress, anxiety and depression. Together we find coping skills that work for her. Each time we meet, I am impressed by ██████'s insight on her emotions and how she is handling them. When I read through ██████'s file on her mental history, I do not see the same student. ██████ has a strong grip on her anxiety and when it starts to overcome her emotions, she utilizes strategies to calm herself down. Her depression has been mild and has stayed that way throughout the school year.

PURNELL SCHOOL

I am very proud of ██████. She has grown so much in the short months since coming to Purnell. I have enjoyed watching ██████ let down her guard and continue to try things that make her feel anxious but still persevering through those uncomfortable feelings. I think our faculty and staff has helped ██████ feel confident in herself to speak up in class and ask for help. ██████ has already accomplished so much within her first year at Purnell and I am excited to continue to watch her grow in her abilities in the future.

Sincerely,
Megan Du Vall

School Counselor
Director of Advising

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AUDIO FILE

LEFT BLANK INTENTIONALLY